## **FEC** FORM 3

# **REPORT OF RECEIPTS AND DISBURSEMENTS**

For Ar	1 Authorized Committee	Office Use Only
1. NAME OF COMMITTEE (in full) USE FEC MA OR TYPE OF	AILING LABEL Example:If typing, type over the lines	
Bill Shuster for Congress		
ADDRESS (number and street) PO Box 2	27	
Check if different		
than previously reported. (ACC)	burg	PA 16648
2. FEC IDENTIFICATION NUMBER \(\psi\)	CITY 🛕	STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
C00364935	3. IS THIS NEW (N) O	AMENDED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) 12-Day <b>PRE</b> -Election Report for t	
April 15 Quarterly Report (Q1)	Primary (12P)	General (12G) Runoff (12R)
	Convention (12C)	Special (12S)
July 15 Quarterly Report (Q2)  X October 15 Quarterly Report (Q3)	Election on	in the State of
January 31 Year-End Report (YE	(c) 30-Day <b>POST</b> -Election Report for	the:
	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election on	in the State of
5. Covering Period 0 7 0 1	2 0 0 7 through	09 30 2007
I certify that I have examined this Report and to t		correct and complete.
Type or Print Name of Treasurer Frec	derick A Ciocca	
Signature of Treasurer Electronically Filed by	Frederick A Ciocca	Date 12 10 2007
NOTE : Submission of false, erroneous, or incor	mplete information may subject the person sign	ning this Report to the penalties of 2 U.S.C 437g.
Office Use Only		FEC FORM 3 (Revised 02/2003)

### Image# 27991000470

### **SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Bill Shuster for Congress ° D 0.7 0 1 0 9 2007 From: 2007 Report Covering the Period: To: 3 0 **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 72647.42 265442.42 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds .00 .00 (from Line 20(d))..... (c) Net Contributions (other than loans) 72647.42 265442.42 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 38308.48 243764.73 (from Line 17)..... (b) Total Offsets to Operating .00 1823.35 Expenditures (from Line 14)..... (c) Net Operating Expenditures 241941.38 38308.48 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 130961.48 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on .00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 37794.23 Schedule C and/or Schedule D)..... For further information contact: Federal Election Commission

999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100 FEC Form 3 (Revised 02/2003)

### **DETAILED SUMMARY PAGE**

of Receipts

Page 3

Write or Type Committee Name Bill Shuster for Congress м м 0 7 ° D Report Covering the Period: 2007 09 2007 0 1 3 0 From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 16967.42 84792.42 (i) Itemized (use Schedule A)..... 8030.00 17350.00 (ii) Unitemized..... (iii) TOTAL of contributions 24997.42 102142.42 from individuals..... .00 .00 (b) Political Party Committees..... (c) Other Political Committees 47650.00 163300.00 (such as PACS)..... .00 .00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 72647.42 265442.42 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER .00 .00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the .00 .00 Candidate..... .00 30000.00 (b) All Other Loans..... (c) TOTAL LOANS .00 30000.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** .00 1823.35 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS .00 .00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 72647.42 297265.77

FEC Form 3 (Revised 02/2003)

### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

**COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 38308.48 243764.73 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER .00 .00 AUTHORIZED COMMITTEES..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed .00 .00 by the Candidate..... .00 .00 (b) Of all Other Loans..... (c) TOTAL LOAN REPAYMENTS .00 .00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other .00 .00 Than Political Committees..... .00 .00 (b) Political Party Committees..... (c) Other Political Committees .00 .00 (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS .00 .00 (add Lines 20(a), (b), and (c))..... 5401.97 14422.97 21. OTHER DISBURSEMENTS..... 22. TOTAL DISBURSEMENTS 43710.45 258187.70 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 102024.51 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 72647.42 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... 174671.93 25. SUBTOTAL (add Line 23 and Line 24)..... 43710.45 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 130961.48 (subtract Line 26 from Line 25).....

S	CHEDULE A (FEC Form 3	1		FOR LINE NUMBER: PAGE 5 / 67
•		,	Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar	y information copied from such Reports ar	nd Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions
or		the name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
17	Bill Shuster for Congress			
_	Full Name (Last First Middle Initial)			
Α.	Full Name (Last, First, Middle Initial) Richard A Alcade			Date of Receipt
	Mailing Address 7442 Old Maple Sq	uare		M M / D D / Y Y Y Y
				09 28 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5722
	Mc Lean	VA	22102	Amount of Each Receipt this Period
	FEC ID number of contributing	C		500.00
	federal political committee.	<u> </u>		300.00
	Name of Employer	Occupation	า	_
	Name of Employer Potomac Partners DC	Lobbyist	•	Limit Increased Due to Opponent's
	Receipt For: 2008		sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			
	Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial)			
В.	Mrs. Madeleine Arison			Date of Receipt
	Mailing Address 9999 Collins Ave			08 07 2007
	Apt 15-GJ City	State	Zip Code	Transaction ID: SA11Ai-CN5561
	Bal Harbour	FL	33154	
			33134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer None	Occupation		
		Homema		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008	Election C	tycle-to-Date ▼	
	X Primary General Other (specify)		1000.00	
	Other (specify)		1 1 1 1 1 1 1	_
	Full Name (Last, First, Middle Initial)			
C.	Peggy J Bosma-LaMascus			Date of Receipt
	Mailing Address 120 Kenwood Road	d		M M / D D / Y Y Y
				08 23 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5626
	Chambersburg	PA	17201	Amount of Each Receipt this Period
	FEC ID number of contributing	C		75.00
	federal political committee.	•		
	Name of Employer	Occupation	1	7
	Patriot Federal Credit Union	President	t/CEO	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1575.00	
	Other (specify)	0 0	1575.00	
_				
				1575.00
S	UBTOTAL of Receipts This Page (optional	d)		1373.00
T	OTAL This Period (last page this line num	ber only)		

S	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6/6/
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)    X   11a
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any persongers of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
$\rangle$	Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) Harold L Brake			Date of Receipt
	Mailing Address 224 Rhondel Drive PO Box 275			08 23 7 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5627
	Saint Thomas	PA	17252	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Charles E Brake Co Inc	Occupation Retired	1	Limit Increased Due to Opponent's
	Receipt For: 2008		sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) Julie Chlopecki			Date of Receipt
	Mailing Address 1547 Evers Drive			09 28 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5745
	Mc Lean	VA	22101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Xenophon Strategies	Occupation Partner	1	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		750.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Christopher C Cox			Date of Receipt
	Mailing Address 3106 Russell Rd			09 28 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5736
	Alexandria	VA	22305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Navigators	Occupation Principal	ı	Limit Increased Due to Opponent's
	Receipt For: 2008	<u> </u>	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00
Т	OTAL This Period (last page this line number of			

S	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/6/
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)    X   11a
Ar	ny information copied from such Reports and Si for commercial purposes, other than using the	atements may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,	
$\rangle$	Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) Richard Kenton Curtis			Date of Receipt
	Mailing Address 500 Carousel Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11Ai-CN5652
	Gaithersburg	MD	20877	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Professional Inspection & Testing Serv	Occupation Vice Pres		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1150.00	
В.	Full Name (Last, First, Middle Initial) Donald Devorris			Date of Receipt
	Mailing Address 304 E Ward Avenue			09 06 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5699
	Altoona	PA	16602	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Blair Electric Services	Occupation President		Limit Increased Due to Opponent's
	Receipt For: 2008		cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1 1 1 1 1 1 1	1
	Other (specify) ▼		1100.00	
C.	Full Name (Last, First, Middle Initial) John T Durbin			Date of Receipt
	Mailing Address 12 Emlyn Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11Ai-CN5641
	Mechanicsburg	PA	17055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Durbin Associates Inc.	Occupation	n Lent & Corporate Relations	Limit Increased Due to Opponent's
	Receipt For: 2008		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	250.00	]
s	UBTOTAL of Receipts This Page (optional)			500.00
T.	OTAL This Period (last page this line number)	anly)	·	

S	CHEDULE A (FEC Form 3)		Llas congreta cohodula(a)	FOR LINE NUMBER: PAGE 8 / 67
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and story for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Bill Shuster for Congress			
Α.				Date of Receipt
	Mailing Address 11328 Bishop Gate Li	า		09 / 06 / 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5645
	Laurel	MD	20723	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Technology Solutions	Occupation Vice Pres	n sident/GM	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		500.00	7
	Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) James L Ervin			Date of Receipt
	Mailing Address 116 Queen Street	08 / 07 / Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11Ai-CN5564
	Alexandria	VA	22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ETA Inc	Occupation President		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) James L Ervin			Date of Receipt
	Mailing Address 116 Queen Street			0 9 2 8 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11Ai-CN5720
	Alexandria	VA	22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ETA Inc	Occupation		
		President		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008  X Primary General  Other (specify)	Election C	ycle-to-Date ▼ 1000.00	Opending (2 0.0.0. 441a(1)/441a 1)
s	UBTOTAL of Receipts This Page (optional) .			1500.00
	OTAL This Period (last page this line number			

S	CHEDULE A (FEC Form 3)		Lla a concrete a chadula(a)	FOR LINE NUMBER: PAGE 9 / 67			
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				12 13a 13b 14 15			
An	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and ado	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
$  \rangle$	Bill Shuster for Congress						
$\angle$							
Α.	Full Name (Last, First, Middle Initial) Harry N Fix			Date of Receipt			
	Mailing Address 2356 Majestic Court			M M / D D / Y Y Y Y			
				09 06 2007			
	City	State	Zip Code	Transaction ID: SA11Ai-CN5649			
	Chambersburg	PA	17201	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		100.00			
	Name of Employer Valley Quarries Inc.	Occupation	1	Limit Increased Due to Opponent's			
	Receipt For: 2008	Retired Flection C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General	Ziodion o		1			
	Other (specify) ▼		1600.00				
В.	Full Name (Last, First, Middle Initial) Maxine L Gindlesperger			Date of Receipt			
	Mailing Address 165 Highfield Ln N			M M / D D / Y Y Y Y			
				09 06 2007			
	City	State	Zip Code	Transaction ID: SA11Ai-CN5655			
	Chambersburg	PA	17201	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		75.00			
	Name of Employer e-lynxx Corporation	Occupation COO	1	Limit Increased Due to Opponent's			
	Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General			1			
	Other (specify)		1575.00				
C.	Full Name (Last, First, Middle Initial) Christopher K Gleason			Date of Receipt			
	Mailing Address PO Box 8			M M / D D / Y Y Y Y			
			<b>-</b>	08 14 2007			
	City	State PA	Zip Code	Transaction ID: SA11Ai-CN5718			
	<u>Johnstown</u>		15907	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		967.42			
	Name of Employer	Occupation		In kind contribution			
	Name of Employer The Gleason Group	President		Limit Increased Due to Opponent's			
	Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	Primary X General		2067.40	In-Kind Received Catering			
	Other (specify) ▼		3267.42	for luncheon			
S	SUBTOTAL of Receipts This Page (optional)						
$\vdash$							
т	OTAL This Period (last page this line number	only)					

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 67
	EMIZED RECEIPTS		or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and Stor commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Bill Shuster for Congress			
Α.				Date of Receipt
	Mailing Address 1572 King Charles Dr			09 / 28 / 7 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5724
	Pittsburgh	PA	15237	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer American Public Transport- ation Assoc	Occupation Vice Pres	n sident - Policy	Limit Increased Due to Opponent's
	Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		500.00	1
	Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Clayton J Heil			Date of Receipt
	Mailing Address 213 Lee St S	09 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11Ai-CN5723
	Falls Church	VA	22046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Ice Miller Strategies LLC	<u>,                                    </u>	Counsel/Founding Member	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 0.3.0. 44 ra(1)/44 ra-1)
	X Primary General		500.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	
C.	Full Name (Last, First, Middle Initial) Mr. James D Hensler			Date of Receipt
	Mailing Address 2521 C South Walter	Reed Dr		09 28 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5738
	Arlington	VA	22206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify)		500.00	
	UBTOTAL of Receipts This Page (optional) .			1500.00
$\vdash$	ODITION OF THE PROPERTY OF THE			
Ιт	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/67
ITEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X   11a   11b   11c   11d   15   12   13a   13b   14   15
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the ha  NAME OF COMMITTEE (In Full)	ane and add	iress or any political committee to	Solicit Continuutions ITOM Such Committee.
Bill Shuster for Congress			
Full Name (Last, First, Middle Initial)  A. Mr. William Perrault Hollier			Date of Receipt
Mailing Address 12707 Westbrook Dr			08 07 7 2007
City	State	Zip Code	Transaction ID: SA11Ai-CN5566
<u>Fairfax</u>	VA	22030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Hollier And Associates LLC	Occupation Governm	ent Relations	Limit Increased Due to Opponent's
Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial)  3. Jacob H Kaufman, Jr			Date of Receipt
Mailing Address 3469 Troon Dr			09 / 06 / 4 2007
City	State	Zip Code	Transaction ID: SA11Ai-CN5650
Chambersburg	PA	17201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer	Occupation	1	Limit Increased Due to Opponent's
Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial)  John N Kennedy			Date of Receipt
Mailing Address 2418 2nd St N			08 23 7 2007
City	State	Zip Code	Transaction ID: SA11Ai-CN5572
<u>Harrisburg</u>	PA	17110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Kennedy Law Offices PC	Occupation Attorney	1	Limit Increased Due to Opponent's
Receipt For: 2008  X Primary General	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last page this line number onl	lv)		

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 67 (check only one)    X
Ar or	ly information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
۹.	Full Name (Last, First, Middle Initial) L Robert Kimball Mailing Address 619 W. Horner Street  City Ebensburg	State PA	Zip Code 15931	Date of Receipt    M M
	FEC ID number of contributing federal political committee.  Name of Employer L. Robert Kimball & Assoc Inc Receipt For: 2008  X Primary General Other (specify)		n/President & CEO Sycle-to-Date  2500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) L Robert Kimball Mailing Address 619 W. Horner Street City	State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Ebensburg FEC ID number of contributing federal political committee.	PA C	15931	Amount of Each Receipt this Period
	Name of Employer L. Robert Kimball & Assoc Inc Receipt For: 2008  X Primary General Other (specify) ▼		n /President & CEO cycle-to-Date ▼ 2300.00	Redesignated to 2008 General  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  [MEMO ITEM]  Redesignated
<b>)</b> .	Full Name (Last, First, Middle Initial) L Robert Kimball Mailing Address 619 W. Horner Street			Date of Receipt
	City	State	Zip Code	0 8 2 3 2 0 0 7  Transaction ID: SA11Ai-CN5571
	Ebensburg FEC ID number of contributing federal political committee.	PA C	15931	Amount of Each Receipt this Period 200.00
	Name of Employer L. Robert Kimball & Assoc Inc Receipt For: 2008  Primary X General Other (specify) ▼	_ · _ · _ ·	n/President & CEO  cycle-to-Date ▼  2500.00	Redesignated from 2008 Primary Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Redesignation
s	UBTOTAL of Receipts This Page (optional)			500.00
Т	OTAL This Period (last page this line number of	only)		

SI	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/6/	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d	
۸۰	ny information copied from such Reports and St	atamanta mai	reat he hald ar used by any person	12 13a 13b 14 15	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.	
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
$\rangle$	Bill Shuster for Congress				
<u>/</u>	-				
۸	Full Name (Last, First, Middle Initial) R Jeffrey Kimball			Date of Receipt	
٦.	Mailing Address 132 West Highland Ave	מוומ		M M / D D / Y Y Y Y	
	102 West Highland Ave	iluc		09 28 2007	
	City	State	Zip Code	Transaction ID: SA11Ai-CN5740	
	Ebensburg	PA	15931	Amount of Each Receipt this Period	
	FEC ID number of contributing			200.00	
	federal political committee.	C		200.00	
	Name of Employer L Robert Kimball and Asso-	Occupation	n	7	
	L Robert Kimball and Asso-	Presiden		Limit Increased Due to Opponent's	
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General		700.00	1	
	Other (specify) ▼	0 0	700.00		
	Full Name (Last, First, Middle Initial)				
3.	P Joseph Lehman, Jr.			Date of Receipt	
	Mailing Address 315 Quince Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11Ai-CN5608	
	Hollidaysburg	PA	16648	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		250.00	
	federal political committee.				
	Name of Employer P Joseph Lehman Inc Engin-	Occupation	n		
	eers	Presiden		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Opending (2 0.0.0. 441a(I)/441a 1)	
	X Primary General Other (specify) ▼		250.00		
	Other (specify)	0 0	0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)			+	
Э.	Ronald M. Little			Date of Receipt	
	Mailing Address 175 McKnight Rd			$\begin{bmatrix} M & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$	
	City	State	Zip Code		
	Blairsville	PA	15717	Transaction ID: SA11Ai-CN5553	
			13/1/	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
		10			
	Name of Employer North Cambria Fuel	Occupation		Limit Increased Due to Opponent's	
	Receipt For: 2008	General Election C	wanager Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General	Licotion		1	
	Other (specify) ▼	l	250.00		
				700.00	
S	UBTOTAL of Receipts This Page (optional)		<b>)</b>	700.00	
_					
т	OTAL This Pariod (last nage this line number of	nniv)	<u> </u>		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 67
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persolates of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\geq$	Bill Shuster for Congress			
A.	Full Name (Last, First, Middle Initial) Alan R Loessy			Date of Receipt
	Mailing Address 371 Roland Avenue			08 / 23 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11Ai-CN5628
	Chambersburg	PA	17201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Letterkenny Army Depot	Occupation Public Af	n fairs Officer	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		750.00	7
	Other (specify) ▼	0 0	750.00	
В.				Date of Receipt
	Mailing Address 213 South 24th Street	09 / 13 / 2007		
	City	State	Zip Code	Transaction ID: SA11Ai-CN5715
	Camp Hill	PA	17011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Wienken & Associates	Occupation Financial	n Services/Investments	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		250.00	1
	Other (specify)			
C.	Full Name (Last, First, Middle Initial) John P McAllister			Date of Receipt
	Mailing Address 3039 Albemarle St NV			09 / 28 / 2007
City		State	Zip Code	Transaction ID: SA11Ai-CN5725
	Washington	DC	20008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer McAllister & Quinn LLC	Occupation Partner	1	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	]
<u>ج</u>	UBTOTAL of Receipts This Page (optional)	1		1500.00
	OTAL This Period (last page this line number			

S	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/6/
	EMIZED RECEIPTS		or each category of the	(check only one)
•	EMIZED RECEIL TO		Detailed Summary Page	X   11a   11b   11c   11d   12   13a   13b   14   15
Ar	ny information copied from such Reports and Sta	itements may	not be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
$\rangle$	Bill Shuster for Congress			
۹.	Full Name (Last, First, Middle Initial) Paul E McNamee			Date of Receipt
	Mailing Address 525 Gatehouse Lane W	est		08 23 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5573
	York	PA	17402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Buchert & Horn	Occupation		<b>1</b>
		-	ng Engineer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008  X Primary General	Election C	cycle-to-Date ▼	
	Other (specify)		250.00	
3.	Full Name (Last, First, Middle Initial) Rosemarie R McNew			Date of Receipt
	Mailing Address 995 Black Gap Road			09 06 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5656
	Fayetteville	PA	17222	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Professional Inspection	Occupation		
	& Test	Presiden		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008  X Primary General	Election C	cycle-to-Date ▼	
	Other (specify)		1150.00	
<u> </u>	Full Name (Last, First, Middle Initial) Steven M Parrett, DDS			Date of Receipt
	Mailing Address 543 Lincoln Way E			M M / D D / Y Y Y Y
				09 06 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5664
	Chambersburg	PA	17201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Self Employed	Occupation	n	
		Dentist		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008  X Primary General	Election C	cycle-to-Date ▼	Sponding (2 s.s.s. Trra(i)/Trra T/
	X Primary General Other (specify) ▼		1050.00	
s	UBTOTAL of Receipts This Page (optional)			450.00
			•	
т	OTAL This Period (last page this line number of	nlv)	<b>•</b>	

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 67 (check only one)  X 11a 11b 11c 11d 11d 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) Brian W Perry  Mailing Address 3030 Beverly Rd  City	State	Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Camp Hill	PA	17011	Transaction ID: SA11Ai-CN5716  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Nealon Gover & Perry  Receipt For: 2008  X Primary General Other (specify) ▼	Occupation Attorney Election C	opcle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Jeffrey N Reeder Mailing Address 10970 McFarland Rd			Date of Receipt
	City	State	Zip Code	0 9 0 6 2 0 0 7  Transaction ID: SA11Ai-CN5653
	Mercersburg	PA	17236	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Universal Projects Inc  Receipt For: 2008  X Primary General Other (specify)	Occupation Business Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0	
<b>3</b> .	W Greg Rothman  Mailing Address One Gunpowder Road			Date of Receipt    M M
	City	State	Zip Code	Transaction ID: SA11Ai-CN5574
	Mechanicsburg  FEC ID number of contributing federal political committee.	C	17050	Amount of Each Receipt this Period  250.00
	Name of Employer RSR Realty	Occupation Realtor		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008  X Primary General  Other (specify)	Election C	cycle-to-Date ▼ 250.00	Opending (2 0.0.0. 441a(1)/441a-1)
SI	UBTOTAL of Receipts This Page (optional)			550.00
T	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17/6/   (check only one)   X 11a
Ar	ny information copied from such Reports and St	atements may	, ,	12 13a 13b 14 15
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) Allison R Shulman			Date of Receipt
	Mailing Address 6407 15th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11Ai-CN5743
	Alexandria	VA	22307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Dickstein Shapiro Morin & Oshinsky	Occupation Vice Pres	sident	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008  X Primary General  Other (specify) ▼	Election C	Sycle-to-Date ▼ 500.00	
В.				Date of Receipt
				07 17 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5556
	Lebanon	PA	17042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		4000.00 1700 to spouse
	Name of Employer Self-Weaber Inc.	Occupation Hardwoo	n d manufacturer	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	4000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Galen G Weaber			Date of Receipt
	Mailing Address 1231 Mt. Wilson Rd			07 17 2007
	City	State	Zip Code	Transaction ID: SA11Ai-CN5558
	Lebanon	PA	17042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		-1700.00
	Name of Employer Self-Weaber Inc.	Occupation	n d manufacturer	Reattributed to Patricia Weaber Limit Increased Due to Opponent's
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]
	X Primary General Other (specify) ▼	0 0	2300.00	Reattributed
s	UBTOTAL of Receipts This Page (optional)			4500.00
$\vdash$	OTAL This Period (last nage this line number)			

X Primary

Other (specify)

General

# SCHEDULE A (FEC Form 3)

PAGE 18/67 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) Patricia A Weaber Date of Receipt Mailing Address 1231 Mt. Wilson Rd 07 17 2007 City State Zip Code Transaction ID: SA11Ai-CN5559 Lebanon PA 17042 Amount of Each Receipt this Period FEC ID number of contributing 1700.00 C federal political committee. Reattributed from Galen Weaber Name of Employer None Occupation Limit Increased Due to Opponent's Homemaker Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Receipt For: 2008 Election Cycle-to-Date X Primary General Reattribution 1700.00 Other (specify) Full Name (Last, First, Middle Initial) B. J Joseph Zimmerman Date of Receipt Mailing Address 2257 Castlegreen Dr 0 9 06 2007 City State Zip Code Transaction ID: SA11Ai-CN5651 Greencastle PA 17225 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Valley Quarries Inc Occupation **Executive Vice President** Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date

1050.00

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	50.00
TOTAL This Period (last page this line number only)	<b>•</b>	16967.42

SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 67 (check only one)  11a 11b X 11c 11d 12 13a 13b 14 15
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Full Name (Last, First, Middle Initial) Citizens For Cober  Mailing Address 242 Barron Road  City Somerset  FEC ID number of contributing federal political committee.  Name of Employer	State PA C	Zip Code 15501	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: 2008  X Primary General  Other (specify) ▼	Election C	Cycle-to-Date ▼ 100.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Dealers Election Action Mailing Address 8400 Westpark Drive  City Mc Lean  FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2008 X Primary General Other (specify)	Occupation None	Zip Code 22102 0040998 n Cycle-to-Date ▼	Date of Receipt  M M M 28 2007  Transaction ID: SA11C-CN5728  Amount of Each Receipt this Period  2000.00  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Geist For Assembly Mailing Address 1100 27th Avenue  City Altoona  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2008  X Primary General Other (specify)	State PA C Occupation Election C	Zip Code 16601 n Cycle-to-Date ▼	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	2150.00
TOTAL This Period (last page this line numbe	r only)	<b>)</b>	

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS	)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 67 (check only one)  11a  11b
An or	y information copied from such Reports and for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) General Dynamics Voluntary  Mailing Address 2941 Fairview Park E Suite 100  City Falls Church  FEC ID number of contributing federal political committee.	State VA	Zip Code 22042 0078451	Date of Receipt    M M M
	Name of Employer None  Receipt For: 2008  X Primary General Other (specify) ▼	Occupation None  Election C	cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Stern For Assembly Mailing Address 412 Union Street	1		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Hollidaysburg	State PA	Zip Code 16648	Transaction ID: SA11C-CN5611  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100+0	100.00
	Name of Employer  Receipt For: 2008  X Primary General Other (specify) ▼	Occupation C	cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Э.	Full Name (Last, First, Middle Initial) Committee To Elect Jimmy Marker Mailing Address 110 JC Lane			Date of Receipt
	City	State	Zip Code	0 9 0 6 2 0 0 7  Transaction ID: SA11C-CN5703
	Rockwood	PA	15557	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer	Occupation	n	Limit Increased Due to Opponent's
	Receipt For: 2008  X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 100.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			1200.00
т.	OTAL This Period (last page this line numbe	er only)		

ITE	HEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 67 (check only one)  11a 11b X 11c 11d 12 13a 13b 14 15
Any or fo	information copied from such Reports and S or commercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
1	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
<b>4.</b> <u>/</u>	Full Name (Last, First, Middle Initial) ACRE Mailing Address 4301 Wilson Boulevard	d		Date of Receipt
_	Dity	State	Zip Code	0 9 2 8 2 0 0 7
	Arlington	VA	21p Code 22203	Transaction ID: SA11C-CN5726  Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	<b>C</b> C00	0002972	1000.00
-	Name of Employer None  Receipt For: 2008  X Primary General Other (specify)	Occupation None  Election C	Cycle-to-Date ▼ 2000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3. <u>/</u>	Full Name (Last, First, Middle Initial) Air Line Pilots Association  Mailing Address 1625 Massachusetts A	venue NW		Date of Receipt
-	City	07 02 2007		
	Nashington	State DC	Zip Code 20036	Transaction ID: SA11C-CN5554  Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.		0035451	2500.00
-	Name of Employer None	Occupation None		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
F	Receipt For: 2008  X Primary General  Other (specify)	Election C	Cycle-to-Date ▼ 5000.00	
_	Full Name (Last, First, Middle Initial) Aircraft Owners Pilots Association			Date of Receipt
٨	Mailing Address 421 Aviation Way			08 23 Y Y Y Y Y Y Y Y Y
	Dity	State	Zip Code	Transaction ID: SA11C-CN5577
	Frederick	MD	21701	Amount of Each Receipt this Period
fe _	FEC ID number of contributing ederal political committee.		0131185	1000.00
1	Name of Employer None	Occupation None	n	Limit Increased Due to Opponent's
F	Receipt For: 2008  X Primary General Other (specify)		Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
SU	BTOTAL of Receipts This Page (optional)			4500.00
TO	TAL This Period (last page this line number	only)		

21	CHEDULE A (FEC Form 3 )			FOR LINE NUMBER: PAGE 22 / 67			
· ·			Use separate schedule(s)	(check only one)			
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b X 11c 11d			
			Detailed Suffiffially Fage	12   13a   13b   14   15			
An	y information copied from such Reports and S	tatements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions			
or	for commercial purposes, other than using the	name and ad	dress of any political committee to	solicit contributions from such committee.			
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
$\rangle$	Bill Shuster for Congress						
/	ű						
	Full Name (Last, First, Middle Initial)						
٩.	American Hospital Association			Date of Receipt			
	Mailing Address 325 Seventh Street NV	1		M M / D D / Y Y Y Y			
				08 07 2007			
	City	State	Zip Code	Transaction ID: SA11C-CN5569			
	Washington	DC	20004	Amount of Each Receipt this Period			
	FEC ID number of contributing	<b>C</b> C0	0100110	2000.00			
	federal political committee.	<b>C</b> C0	0106146	2000.00			
	Name of Employer Occupation		n	_			
	none	none	11	Limit Increased Due to Opponent's			
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General	LIECTION	ycle-to-Date ▼				
	Other (specify)		2000.00				
	Other (specify)	0 0	0 0 0 0 0 0				
	Full Name (Last, First, Middle Initial)						
3.	American Hospital Association			Date of Receipt			
	Mailing Address 325 Seventh Street NW	I		M M / D D / Y Y Y Y			
	OZO OCYCINII ONOCI IVV			09 28 2007			
	City	State	Zip Code	Transaction ID: SA11C-CN5731			
	Washington	DC	20004	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C CO	0106146	1000.00			
	Name of Employer none	Occupatio	n				
		none		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Sponding (2 0.0.0. 4414(1)/4414 1)			
	X Primary General		3000.00	1			
	Other (specify)	0 0	3000.00				
•	Full Name (Last, First, Middle Initial) American Maritime Officers Voluntary			Date of Receipt			
<b>J</b> .	<del></del>						
	Mailing Address 2 West Dixie Highway			09 28 2007			
	City	State	Zip Code	Transaction ID: SA11C-CN5729			
	Dania	FL	33004	Amount of Each Receipt this Period			
		1 -	3000.				
	FEC ID number of contributing federal political committee.	<b>C</b> C0	0027532	1000.00			
	Toderai pointoai dominintee.						
	Name of Employer None	Occupatio	n				
		None		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 0.5.0. 44 ra(1)/44 ra-1)			
	X Primary General		1000.00	1			
	Other (specify) ▼	0 0	1000.00				
S	UBTOTAL of Receipts This Page (optional)			4000.00			
T	OTAL This Period (last page this line number	only)	<b>)</b>				

SCHEDULE A ( ITEMIZED REC			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NU (check only one	e) 11b 🛛 11c 🔲 11d	
Any information copied f	rom such Reports and Si	tatements may	not be sold or used by any persodress of any political committee to	n for the purpose	13a 13b 14 2 of soliciting contributions on from such committee.	15
NAME OF COMMIT Bill Shuster for Co	TEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	arowers Assoc 156 15th St NW uite 1101	Occupation None	Sycle-to-Date ▼	Amount of I	ceipt  28 2007  n ID: SA11C-CN5727  Each Receipt this Period  500.00  creased Due to Opponent's g (2 U.S.C. 441a(i)/441a-1)	
Other (specify)	▼	0 0	500.00			
City		State	Zip Code	Date of Rec	D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Washington FEC ID number of co federal political comn		C COO	20001 0082917	Amount of I	Each Receipt this Period	
Name of Employer None  Receipt For:  X Primary  Other (specify)	2008 General	Occupation None Election C	n Cycle-to-Date ▼ 1000.00		creased Due to Opponent's g (2 U.S.C. 441a(i)/441a-1)	
Full Name (Last, Firs AT&T Inc Mailing Address 17	t, Middle Initial)	A-50 E		Date of Rec	ceipt	
City San Antonio  FEC ID number of confederal political commod Properties of Employer None  Receipt For:  X Primary Other (specify)	ontributing nittee. 2008 General	State TX  C Coo	Zip Code 78205 0109017 n Cycle-to-Date ▼	Transaction Amount of I	3 0 2 0 0 7  n ID: SA11C-CN5560  Each Receipt this Period  2000.00  creased Due to Opponent's g (2 U.S.C. 441a(i)/441a-1)	_
SUBTOTAL of Receipt	s This Page (optional)				3500.00	
TOTAL This Period (la	st page this line number	only)				

S	CHEDULE A (FEC Form 3	)		FOR LINE NUMBER: PAGE 24 / 67			
•		,	Use separate schedule(s) or each category of the	(check only one)			
П	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d			
				12 13a 13b 14 15			
Ar	y information copied from such Reports an	d Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions			
Or		the name and add	aress of arry political committee to	o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	Bill Shuster for Congress						
	Full Name (Last, First, Middle Initial)						
A.				Date of Receipt			
	Mailing Address 175 Houston-Room	7-A-50 E		09 13 Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: SA11C-CN5714			
	San Antonio	TX	78205	Amount of Each Receipt this Period			
		17	70200	Amount of Each Neceipt this Period			
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0109017	2500.00			
	·						
	Name of Employer None	Occupation	n	Limit Increased Due to Opponent's			
	Receipt For: 2008	None   None	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General	Election	ycle-to-Date ▼				
	Other (specify)		4500.00				
		0 0	0 0 0 0 0 0 0	_			
	Full Name (Last, First, Middle Initial)	•					
В.	Automotive Free International Trade			Date of Receipt			
	Mailing Address 1625 Prince Street S	Suite 225		09 10 2007			
	City	State	Zip Code	Transaction ID: SA11C-CN5712			
	Alexandria	VA	22314	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	<b>C</b> C00	0250399	5000.00			
	Name of Employer	l Ossumation					
	Name of Employer none	Occupation	II	Limit Increased Due to Opponent's			
	Receipt For: 2008		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General		·	7			
	Other (specify)		5000.00				
_	Full Name (Last, First, Middle Initial) BAE Systems USA			Date of Receipt			
<b>J</b> .	Mailing Address 1300 17th St N			M M / D D / Y Y Y Y			
	Suite 1400			09 28 2007			
	City	State	Zip Code	Transaction ID: SA11C-CN5733			
	Arlington	VA	22209	Amount of Each Receipt this Period			
	FEC ID number of contributing	<b>C</b> C00	0281212	1000.00			
	federal political committee.	C	J281212	1000.00			
	Name of Employer	Occupation	n	7			
	None	None		Limit Increased Due to Opponent's			
	Receipt For: 2008	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General		1000.00	7			
	Other (specify)		1000.00	1			
•	UBTOTAL of Receipts This Page (optional	)		8500.00			
$\vdash$	ODITION TO THE CONTROL THIS FAGE (OPHONIA	· · · · · · · · · · · · · · · · · · ·					
<sub>T</sub>	TOTAL This Period (last page this line number only)						

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 25 / 67 (check only one)
-			Detailed Summary Page	11a 11b X 11c 11d 12 13a 13b 14 15
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may	/ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
$\rangle$	Bill Shuster for Congress			
۹.	Full Name (Last, First, Middle Initial) Comcast Corporation			Date of Receipt
	Mailing Address 1500 Market Street 33rd Floor East Tower			09 28 2007
	City	State	Zip Code	Transaction ID: SA11C-CN5732
	Philadelphia	PA	19102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0248716	2500.00
	Name of Employer none	Occupation	n	Limit Increased Due to Opponent's
	Receipt For: 2008	none Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	1 1	2500.00	
3.	Full Name (Last, First, Middle Initial) Cruise Lines International Assoc			Date of Receipt
	Mailing Address 2111 Wilson Blvd 8th Floor			08 07 7 2007
	City	State	Zip Code	Transaction ID: SA11C-CN5562
	Arlington	VA	22201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0432393	1000.00
	Name of Employer None	Occupation	n	Limit Increased Due to Opponent's
	Receipt For: 2008	None Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Fluor Corporation			Date of Receipt
٠.	Mailing Address 403 East Capitol Street	SE		M M / D D / Y Y Y Y
	City	State	Zip Code	0 8 2 3 2 0 0 7  Transaction ID: SA11C-CN5576
	Washington	DC	20003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0034132	1000.00
	Name of Employer None	Occupation	n	Limit leaves and Due to Oppose with
	Receipt For: 2008	None Election C	Sycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		1000.00	
SI	UBTOTAL of Receipts This Page (optional)			4500.00
т	OTAL This Period (last page this line number o	nly)	<b>)</b>	

SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 67 (check only one)  11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Full Name (Last, First, Middle Initial) Great Lakes Sugarbeet Growers  Mailing Address 2600 Euclid Ave S  City Bay City FEC ID number of contributing federal political committee.  Name of Employer None	Occupatio	Zip Code 48707 0168542	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: 2008  X Primary General  Other (specify)	None Election C	Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Jack Mailing Address PO Box 14  City	State	Zip Code	Date of Receipt    M
Buffalo  FEC ID number of contributing federal political committee.	NY	14205 0271171	Amount of Each Receipt this Period  300.00
Name of Employer None  Receipt For: 2008  X Primary General Other (specify) ▼	Occupatio None Election C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial)  Manitowoc Company Inc  Mailing Address PO Box 1101  1600 Ely Street  City  Marinette  FEC ID number of contributing federal political committee.	State WI	Zip Code 54143 0287847	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer None  Receipt For: 2008  X Primary General Other (specify) ▼	Occupatio None Election C	Dycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)			1800.00
TOTAL This Period (last page this line number	er only)		

9	CHEDULE A (FEC Form 3)			FOR LINE NUMBER: PAGE 27 / 67
•			Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b X 11c 11d
			Detailed Suffilliary Fage	12   13a   13b   14   15
Ar	ny information copied from such Reports and St	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
$\rangle$	Bill Shuster for Congress			
_				<u>_</u>
	Full Name (Last, First, Middle Initial)			
Α.	MeadWestvaco			Date of Receipt
	Mailing Address 11013 Broad St W			08 07 2007
	City.	Ctata	Zin Code	
	City	State	Zip Code	Transaction ID: SA11C-CN5568
	Glen Allen	VA	23060	Amount of Each Receipt this Period
	FEC ID number of contributing	<b>C</b> C00	0065987	1000.00
	federal political committee.	000	3003307	
	Name of Employer	Occupation	n	
	none	none		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	-		7
	Other (specify)		1000.00	
				-
	Full Name (Last, First, Middle Initial)			
В.	National Community Pharmacists Assoc			Date of Receipt
	Mailing Address 100 Daingerfield Rd			M M / D D / Y Y Y Y
		09 28 2007		
	City	State	Zip Code	Transaction ID: SA11C-CN5730
	Alexandria	VA	22314	Amount of Each Receipt this Period
	FEC ID number of contributing	C 000	222222	1000.00
	federal political committee.	<b>C</b> C00	0030809	1000.00
	Name of Employer	Occupation	<u> </u>	$\dashv$
	None	None	.1	Limit Increased Due to Opponent's
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	Election	yole to Bate V	-
	Other (specify)		1000.00	
	case (operation) \	0 0	0 0 0 0 0 0 0	4
	Full Name (Last, First, Middle Initial)	<u> </u>		
C.	NSSGA Rock			Date of Receipt
	Mailing Address 1605 King Street			M M / D D / Y Y Y
				09 30 2007
	City	State	Zip Code	Transaction ID: SA11C-CN5755
	Alexandria	VA	22314	Amount of Each Receipt this Period
	FEC ID number of contributing	C 000	222245	1000.00
	federal political committee.	<b>C</b> C00	0089458	1000.00
	Name of Employer	me of Employer Occupation		$\dashv$
	None	None	.11	Limit Increased Due to Opponent's
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	Licetion	yele to Bate 🔻	-
	Other (specify)		1000.00	
		0 0		-
0	UBTOTAL of Receipts This Page (optional)			3000.00
	ODI OTAL OF HOOSIPIS THIS Fage (optional)			
т	OTAL This Period (last page this line number of	anly)	1	
•	This i onou hast page this intertulliber	٠٠، <i>٠٠٠ )</i>		

e i	CHEDIII E A /EEC Form 2 \			FOR LINE NUMBER: PAGE 28 / 67
Э١	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	11a 11b X 11c 11d
			Detailed Summary Page	12 13a 13b 14 15
۸۰	y information copied from such Reports and Sta	stomonto mos	, not be cold or used by any pers	•
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	osolicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
	Bill Shuster for Congress			
/	bill Shuster for Congress			
	Full Name (Last, First, Middle Initial)			
Α.	Owner Operator Independent Drivers			Date of Receipt
	Mailing Address 1101 30th Street NW			M M / D D / Y Y Y Y
				08 07 2007
	City	State	Zip Code	Transaction ID: SA11C-CN5567
	Washington	DC	20007	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	<b>C</b> C00	0236778	1000.00
	Name of Employer None	Occupation	n	
		None		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008	Election C	cycle-to-Date ▼	Spending (2 0.3.0. 44 ra(1)/44 ra-1)
	X Primary General		2000.00	1
	Other (specify) ▼		2000.00	
_	Full Name (Last, First, Middle Initial)			
В.	Owner Operator Independent Drivers			Date of Receipt
	Mailing Address 1101 30th Street NW			09 28 2007
	City	State	Zip Code	
	City		•	Transaction ID: SA11C-CN5749
	Washington	DC	20007	Amount of Each Receipt this Period
	FEC ID number of contributing	<b>C</b> C00	0236778	500.00
	federal political committee.	0,00	700,70	
	Name of Employer	Occupation	n	
	None	None		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			1
	Other (specify)		2500.00	
_	Full Name (Last, First, Middle Initial)			
C.	Railway Supply Institute			Date of Receipt
	Mailing Address 50 F St NW Suite 7030			09 06 2007
	211	01-1-	7's Osda	
	City	State	Zip Code	Transaction ID: SA11C-CN5642
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing	<b>C</b> C00	0261933	500.00
federal political committee.			9201333	
	Name of Employer	Occupation	n	
	None	None		Limit Increased Due to Opponent's
	Receipt For: 2008		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		· · · · · · · · · · · · · · · · · · ·	1
	Other (specify) ▼	1	500.00	
s	UBTOTAL of Receipts This Page (optional)			2000.00
T	OTAL This Period (last page this line number o	nly)		

IT	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 67 (check only one)  11a  11b  X 11c  11d  12  13a  13b  14  15							
An or	y information copied from such Reports and for commercial purposes, other than using the	Statements may be name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress										
۹.	Full Name (Last, First, Middle Initial) Realtors Mailing Address 430 North Michigan A	Avenue		Date of Receipt							
	City	State	Zip Code	07 02 2007 Transaction ID: SA11C-CN5555							
	Chicago	IL	60611	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0030718	1000.00							
	Name of Employer None  Receipt For: 2008  X Primary General Other (specify) ▼	Occupation None  Election C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)							
3.	Full Name (Last, First, Middle Initial) Realtors Mailing Address 430 North Michigan A	Avenue		Date of Receipt							
		09 26 2007									
	City Chicago	State II	Zip Code 60611	Transaction ID: SA11C-CN5719  Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0030718	1000.00							
	Name of Employer None	Occupation None		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)							
	Receipt For: 2008  X Primary General  Other (specify) ▼	Election C	Cycle-to-Date ▼ 2000.00								
<b>)</b> .	Full Name (Last, First, Middle Initial) RJ Reynolds			Date of Receipt							
	Mailing Address PO Box 718 401 N. Main Street City	State	Zip Code	0 9 2 8 2 0 0 7 2 8 2 0 0 7							
	Winston Salem	NC	27102	Transaction ID: SA11C-CN5734  Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0042002	1000.00							
	Name of Employer None	Occupation None		Limit Increased Due to Opponent's							
	Receipt For: 2008  X Primary General  Other (specify)	Election C	Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)							
S	UBTOTAL of Receipts This Page (optional)		)	3000.00							
T	OTAL This Period (last page this line numbe	er only)									

SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 67 (check only one)  11a  11b
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	up on the sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Full Name (Last, First, Middle Initial) Turkish Coalition USA  Mailing Address 1025 Connecticut Ave Suite 1000  City	e State	Zip Code	Date of Receipt    M
Washington FEC ID number of contributing federal political committee.	C COO	20036 0432526	Amount of Each Receipt this Period
Name of Employer None  Receipt For: 2008  X Primary General Other (specify) ▼	Occupation None  Election C	Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) United Transportation Union Mailing Address 14600 Detroit Avenue			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lakewood	State OH	Zip Code 44107	Transaction ID: SA11C-CN5756  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		0001636	5000.00
Name of Employer None  Receipt For: 2008  Primary X General  Other (specify) ▼	Occupation None Election C	n Cycle-to-Date ▼ 7500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) United Transportation Union Mailing Address 14600 Detroit Avenue			Date of Receipt
City  Lakewood  FEC ID number of contributing federal political committee.	State OH	Zip Code 44107 0001636	Transaction ID: SA11C-CN5757  Amount of Each Receipt this Period  2500.00
Name of Employer None  Receipt For: 2008  X Primary General Other (specify) ▼	Occupation None  Election C	n Cycle-to-Date ▼ 10000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) .		)	8500.00
TOTAL This Period (last page this line number	r only)		

FOR LINE NUMBER: PAGE 31/67 SCHEDULE A (FEC Form 3 ) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 12 13a 13b 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) Wine Spirits Wholesalers Of America Date of Receipt Mailing Address 805 Fifteenth Street NW Suite 430 09 06 2007 City Zip Code State Transaction ID: SA11C-CN5644 Washington DC 20005 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C C00147173 federal political committee. Name of Employer None Occupation Limit Increased Due to Opponent's None Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date X Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1000.00
TOTAL This Period (last page this line number only)	<b>•</b>	47650.00

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 32 / 67			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	<u>l</u> É	17 18 19a X 19b 20a 20b 20c 21			
Any Information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) Bill Shuster for Congress						
Full Name (Last, First, Middle Initial) <b>A.</b> S&T Bank			Transaction ID: SB19B-LP69 Date of Disbursement  0 7			
Mailing Address Commercial Lending 208 West Plank Road						
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period			
Purpose of Disbursement Repay Loan Candidate Name		Category/ Type	.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
• 🗎	sement For: 2008  X Primary General Other (specify)	Турс	Interest only payment			
Full Name (Last, First, Middle Initial) <b>B.</b> S&T Bank			Transaction ID: SB19B-LP70 Date of Disbursement			
Mailing Address Commercial Lending 208 West Plank Road	$\begin{bmatrix}\begin{smallmatrix}M\\O^M\end{smallmatrix}7^M&\begin{smallmatrix}\\&\\&\end{smallmatrix}\end{bmatrix}^{D}\begin{bmatrix}\begin{smallmatrix}D\\D^D\end{smallmatrix}7&\begin{smallmatrix}\\&\\&\end{smallmatrix}\end{bmatrix}^{D}\begin{bmatrix}\begin{smallmatrix}Y\\D^D\end{smallmatrix}7&\begin{smallmatrix}Y\\D^D\end{smallmatrix}7&Y\\D^D^D\end{bmatrix}^{D}$					
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period			
Purpose of Disbursement Repay Loan Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
· -	sement For: 2008  X Primary General  Other (specify)		Interest only payment			
Full Name (Last, First, Middle Initial)  C. S&T Bank			Transaction ID: SB19B-LP71 Date of Disbursement			
Mailing Address Commercial Lending 208 West Plank Road		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ D & O \end{smallmatrix} O O O \end{smallmatrix} O$				
City Altoona	City State Zip Code					
Purpose of Disbursement Repay Loan		.00 Refund or Disposal of Excess				
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
9 🗎	sement For: 2008  X Primary General  Other (specify)		Interest only payment			
SUBTOTAL of Disbursements This Page (optional	l)		0.00			
TOTAL This Period (last page this line number onl	у)		0.00			

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	·			
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) Bill Shuster for Congress						
Full Name (Last, First, Middle Initial)  A. S&T Bank			Transaction ID: SB17-LP69 Date of Disbursement			
Mailing Address Commercial Lending 208 West Plank Road			$\begin{bmatrix} 0 & 7 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 6 \\ 0 & 1 & 6 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 1 \\ 0 & 2 & 1 \end{bmatrix}$			
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period			
Purpose of Disbursement Loan interest Expenditure			Refund or Disposal of Excess			
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	ement For: 2008 Primary General Other (specify)		Interest only payment			
Full Name (Last, First, Middle Initial)			Transaction ID: SB17-LP70			
S&T Bank		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
208 West Plank Road						
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period			
Purpose of Disbursement Loan interest Expenditure		226.25  Refund or Disposal of Excess				
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
ÿ	ement For: 2008 Primary General Other (specify)		Interest only payment			
Full Name (Last, First, Middle Initial) - S&T Bank			Transaction ID: SB17-LP71 Date of Disbursement			
Mailing Address Commercial Lending 208 West Plank Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & T \\ Y & D & O & O & T \end{bmatrix}$			
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period			
Purpose of Disbursement Loan interest Expenditure	rpose of Disbursement					
Candidate Name	l l	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
· -	ement For: 2008 Primary General Other (specify)		Interest only payment			
SUBTOTAL of Disbursements This Page (optional)			652.50			
TOTAL This Period (last page this line number only)		<b>)</b>				

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	CHEDULE B (FEC Form 3)	schedule(s)	FOR LINE (check only					
IT	EMIZED DISBURSEMENTS	for each category  Detailed Summ		1 ` <u>-</u>	X 17			
		Detailed Guillin	iary r age		20a 20b 20c 21			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
Λ	NAME OF COMMITTEE (In Full)							
/	Bill Shuster for Congress							
_	Full Name (Last, First, Middle Initial)				Transaction ID: SB17-EX4935			
A.	US Postal Service				Date of Disbursement			
	Mailing Address 525 Allegheny Street				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 & Y \end{bmatrix}$			
	•		Code 648		Amount of Each Disbursement this Period			
	Purpose of Disbursement				41.00			
	Postage Candidate Name			001 Category/	Refund or Disposal of Excess Contributions Required Under			
				Type	11 C.F.R. 400.53			
	• 🗎 –	ment For: Primary	2008 General		Postage			
	President	Other (specify)						
	State: District:							
В.	Full Name (Last, First, Middle Initial) US Postal Service				Transaction ID: SB17-EX5018			
			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	Mailing Address 525 Allegheny Street		08 / 24 / 4 2007					
	,		Code 648		Amount of Each Disbursement this Period			
	Purpose of Disbursement	J-0		410.00				
	Postage			001	Refund or Disposal of Excess Contributions Required Under			
	Candidate Name			Category/ Type	11 C.F.R. 400.53			
		ment For: Primary	2008 General		Postage			
	President	Other (specify)						
	State: District:							
C.	Full Name (Last, First, Middle Initial) US Postal Service				Transaction ID: SB17-EX5019 Date of Disbursement			
	Mailing Address 525 Allegheny Street		$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$					
			Code 648		Amount of Each Disbursement this Period			
	Purpose of Disbursement Postage			001	Defend on Disposal of Fundamental			
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
		ment For:	2008		Postage			
	Senate X President	Primary Other (specify)	General		· colago			
	State: District:	Calci (Specify)	•					
				·	615.00			
Į S	<b>UBTOTAL</b> of Disbursements This Page (optional) .		<u></u>	<b>&gt;</b>	010.00			

TOTAL This Period (last page this line number only) .....

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S	SCHEDULE B (FEC Form 3)			erate schedule(s)		IE NUMBER: PAGE 35 / 67
IT	EMIZED DISBURSEME	NTS		category of the	(check o	
			Detailed Summary Page			20a 20b 20c 21
						n for the purpose of solicating contributions solicit contributions from such committee
Λ	NAME OF COMMITTEE (In Full)					
/	Bill Shuster for Congress					
<u></u>	Full Name (Last, First, Middle Initial)					T ID OD47 5V4000
A.	William Shuster					Transaction ID: SB17-EX4988  Date of Disbursement
	Mailing Address 9 Overlook D	rive				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Hollidaysburg		State PA	Zip Code 16648		Amount of Each Disbursement this Period
	Purpose of Disbursement				in i	13.00
	Travel Expenses Candidate Name				002 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	0" 0 1:	1 5: 1			Туре	11 G.F.N. 400.55
	Office Sought: House Senate		ment For: Primary	2008 General		Travel Expenses
	State: President  District:		Other (spe	ecify) 🔻		
	Full Name (Last, First, Middle Initial)					Transaction ID: SB17-EX4925
В.	Ciocca Benton & Company P.C	Date of Disbursement				
	Mailing Address 912 Pleasant	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Altoona		State PA	Zip Code 16602		Amount of Each Disbursement this Period
	Purpose of Disbursement		ГА		26.39	
	Office Supplies				001	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate		ment For: Primary	2008 General		Office Supplies
	President	^	Other (spe			
	State: District:			<i>37</i> , <b>4</b>		
_	Full Name (Last, First, Middle Initial)	•				Transaction ID: SB17-EX4956
C.	Ciocca Benton & Company P.C.					Date of Disbursement
	Mailing Address 912 Pleasant Valley Blvd					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Altoona		State PA	Zip Code 16602		Amount of Each Disbursement this Period
	Purpose of Disbursement					18.16
	UPS Charges				001	Refund or Disposal of Excess Contributions Required Under
	Candidate Name				Category/ Type	11 C.F.R. 400.53
	Office Sought: House		ment For:	2008		UPS Charges
	Senate	X	Primary	General		C. Condigod
	State: President District:		Other (spe	есіту) 🔻		
_	State. DISTICT.					
ا	IIRTOTAL of Disbursements This Pa	nge (ontional)			_	57.55

TOTAL This Period (last page this line number only) .....

S	CHEDULE B (FEC Form 3)			EOR LINE	NUMBER: PAGE 36 / 67								
ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the	(check only							30 / 0/			
•	EMIZED DISBURSEMENTS	Detailed Summary Page		X 17 20a		18 20b	$oldsymbol{\sqcup}$	19a 20c		19b 21			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name												
$\setminus$	NAME OF COMMITTEE (In Full)												
$\mathbb{Z}$	Bill Shuster for Congress												
A.	Full Name (Last, First, Middle Initial) Ciocca Benton & Company P.C.						Transaction ID: SB17-EX4966 Date of Disbursement						
	Mailing Address 912 Pleasant Valley Blvd	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$											
		State Zip Code PA 16602			Amou	nt of	Each	Disb	urse	-	t this Period		
	Purpose of Disbursement Accounting Services			001			d or Di			Exc			
	Candidate Name			ategory/ Type			outions R. 40		uired	d Un	ider		
	Senate X President	ment For: 2008 Primary General Other (specify)			Accounting Services								
	State: District:												
В.	Full Name (Last, First, Middle Initial) Verizon				Transaction ID: SB17-EX4922 Date of Disbursement								
	Mailing Address PO Box 660748						$\begin{bmatrix} M & M $						
	,	State Zip Code TX 75266			Amou	nt of	Each	Disb	urse	men	t this Period		
	Purpose of Disbursement Telephone Expenses	001	160.2  Refund or Disposal of Excess					160.26 ess					
	Candidate Name		ategory/ Type	Contributions Required Under 11 C.F.R. 400.53									
	• 🗎 –	ment For: 2008 Primary General Other (specify)			Telephone Expenses								
	State: District:	(-  <b>)</b> /											
C.	Full Name (Last, First, Middle Initial) Verizon				Trans Date o		-		. –	X49	953		
	Mailing Address PO Box 660748						08 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
	City State Zip Code Dallas TX 75266						Amount of Each Disbursement this Period						
	Purpose of Disbursement						157.67						
	Telephone Expenses Candidate Name	001 ategory/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53										
	Senate X	ement For: 2008 Primary General		Гуре	Telepl				es				
	State: President District:	Other (specify)											
s	SUBTOTAL of Disbursements This Page (optional)												

TOTAL This Period (last page this line number only) ......

SCHEDIII E P	(FEC Form 3)			FORLINE	DACE 07/67				
	•	Use seperate sche		(check only	E NUMBER: PAGE 37 / 67 nly one)				
I EMIZED DIS	BBURSEMENTS	for each category Detailed Summary		` <u>-</u>	X 17	19a 19b 20c 21			
	d from such Reports and Statem poses, other than using the name								
NAME OF COMM	 IITTEE (In Full)		<u>.                                      </u>						
Bill Shuster for	, ,								
Full Name (Last, F Verizon	rirst, Middle Initial)				Transaction ID: SE Date of Disburseme				
Mailing Address	PO Box 660748				09 / 14	2007			
City Dallas		State Zip Coo TX 75266			Amount of Each Dis	bursement this Period			
Purpose of Disbur Telephone Expens				001	Refund or Dispo	168.43			
Candidate Name				ategory/ Type	Contributions Re 11 C.F.R. 400.5	equired Under			
Office Sought:	Senate X President		08 eneral		Telephone Expens	ses			
State:	District:								
Full Name (Last, F Sheetz Inc	First, Middle Initial)				Transaction ID: SE Date of Disburseme				
Mailing Address	5700 Sixth Avenue		07	<sup>'</sup> 2007					
City Altoona		State Zip Coo PA 16602			Amount of Each Dis	bursement this Period			
Purpose of Disbur Gasoline	sement			001	Refund or Dispo	24.01 sal of Excess			
Candidate Name			C	ategory/ Type	Contributions Re	quired Under 3			
Office Sought:	$\rightarrow$ $-$		08 eneral		Gasoline				
State:	District:								
Full Name (Last, F Sheetz Inc	rirst, Middle Initial)				Transaction ID: SE Date of Disburseme				
Mailing Address	5700 Sixth Avenue				09 / 030	2007			
City Altoona		State Zip Coo PA 16602			Amount of Each Dis	bursement this Period			
Purpose of Disbur	sement			•		36.00			
Gasoline Candidate Name			C	001 ategory/ Type	Refund or Dispo Contributions Re 11 C.F.R. 400.5	equired Under			
Office Sought:			08 eneral	Ni	Gasoline				
State:	District:	•							
	President	Other (specify)		<u>►</u>		2			

SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	(check only	
	Detailed Summary Page		20a 20b 20c 21
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Full Name (Last, First, Middle Initial)  A. Sheetz Inc			Transaction ID: SB17-EX5039 Date of Disbursement
Mailing Address 5700 Sixth Avenue			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} J & J & D \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & T \\ 2 & 0 & 0 & 7 \end{bmatrix}$
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period
Purpose of Disbursement Gasoline Candidate Name		001 Category/ Type	27.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
• 🗎 –	ement For: 2008  Primary General  Other (specify)	- 7,5-2	Gasoline
Full Name (Last, First, Middle Initial) <b>B.</b> Sheetz Inc			Transaction ID: SB17-EX5040 Date of Disbursement
Mailing Address 5700 Sixth Avenue			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 3 & 0 \\ 0 & 3 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 1 \\ 0 & 2 & 0 & 0 \\ 0 & 7 & M \end{bmatrix}$
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period
Purpose of Disbursement Gasoline Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	ement For: 2008  Primary General  Other (specify)		Gasoline
Full Name (Last, First, Middle Initial)  C. Sheetz Inc			Transaction ID: SB17-EX5041 Date of Disbursement
Mailing Address 5700 Sixth Avenue			$\begin{bmatrix} M & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} D & 3 & 0 \\ 0 & 3 & 0 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & 0 & Y \\ 0 & 2 & 0 & 0 & 7 \end{bmatrix}$
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period
Purpose of Disbursement Gasoline		001	20.05  Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	ement For: 2008  Primary General  Other (specify)		Gasoline
SUBTOTAL of Disbursements This Page (optional)			85.05
TOTAL This Period (last page this line number only			

·	e# 21991000301					
	CHEDULE B (FEC Form 3 EMIZED DISBURSEMEN	· 1	erate schedule(s) category of the Summary Page	(check only	NUMBER: PAGE 39 / 67 y one)  X 17 18 19a 19b 20a 20b 20c 21	
	y Information copied from such Reports for commercial purposes, other than usir		for the purpose of solicating contributions clicit contributions from such committee			
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress					
Α.	Full Name (Last, First, Middle Initial) Sheetz Inc  Mailing Address 5700 Sixth Aver	NII A				Transaction ID: SB17-EX5042 Date of Disbursement
	City Altoona Purpose of Disbursement Gasoline Candidate Name  Office Sought:  House Senate President	S F	nent For: Primary Other (spe	Zip Code 16602	001 Category/ Type	Amount of Each Disbursement this Period  42.46  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  Gasoline
	State: District:					
В.	Full Name (Last, First, Middle Initial) PA UC Fund  Mailing Address PO Box 68568					Transaction ID: SB17-EX4940 Date of Disbursement  O 7
	City Harrisburg Purpose of Disbursement Payroll Taxes Candidate Name		tate PA	Zip Code 17106	001 Category/	Amount of Each Disbursement this Period  32.04  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  House Senate President State: District:		nent For: Primary Other (spe	2008 General	Туре	Payroll Taxes
C.	Full Name (Last, First, Middle Initial) The Dream Restaurant					Transaction ID: SB17-EX4936 Date of Disbursement
	Mailing Address 1500 Allegheny	Street				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City Hollidaysburg Purpose of Disbursement Travel Expenses		tate PA	Zip Code 16648	002	Amount of Each Disbursement this Period  26.22  Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	2008 General		Travel Expenses
_	State: District:					
s	UBTOTAL of Disbursements This Page	(optional)			<b>&gt;</b>	100.72

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SCHEDULE B (FEC Form 3 ) Use seperate schedule(s) for each entragen of the				IE NUMBER: PAGE 40 / 67				
IT	EMIZED DISBURSEMEN	ITS		category of the Summary Page	(check on	X   17		
						for the purpose of solicating contributions olicit contributions from such committee		
$\setminus$	NAME OF COMMITTEE (In Full)							
$\rangle$	Bill Shuster for Congress							
Α.	Full Name (Last, First, Middle Initial) The Dream Restaurant					Transaction ID: SB17-EX5050 Date of Disbursement		
	Mailing Address 1500 Alleghen	y Street				$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} 3 & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City Hollidaysburg		State PA	Zip Code 16648		Amount of Each Disbursement this Period		
	Purpose of Disbursement Travel Expenses				002	74.70  Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		ment For: Primary Other (spe	2008 General		Travel Expenses		
	State: District:		- t (op :	, <b>∀</b>				
В.	Full Name (Last, First, Middle Initial) Capitol Hill Club					Transaction ID: SB17-EX4928 Date of Disbursement		
	Mailing Address 300 First Stree	t SE				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City Washington		State DC	Zip Code 20003		Amount of Each Disbursement this Period		
	Purpose of Disbursement Travel Expenses				002	328.11  Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		ment For: Primary Other (spe	2008 General		Travel Expenses		
	State: District:			·				
C.	Full Name (Last, First, Middle Initial) Capitol Hill Club					Transaction ID: SB17-EX4965 Date of Disbursement		
	Mailing Address 300 First Stree	t SE				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City Washington		State DC	Zip Code 20003		Amount of Each Disbursement this Period		
	Purpose of Disbursement					143.11		
	Candidate Name				002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		ment For: Primary Other (spe	2008 General		Travel Expenses		
	State: District:							
s	UBTOTAL of Disbursements This Pag	e (optional) .			<b>&gt;</b>	545.92		

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	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS		erate schedule(s) category of the	FOR LINE (check only	NUMBER: PAGE 41 / 67 y one)
••	LIMIZED DISDONSLIMENTS		Summary Page		X 17
	y Information copied from such Reports and State for commercial purposes, other than using the name				
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress				
Α.	Full Name (Last, First, Middle Initial) Capitol Hill Club				Transaction ID: SB17-EX4998 Date of Disbursement
	Mailing Address 300 First Street SE				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & A \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & O & O & T \end{smallmatrix} \end{bmatrix}$
	City Washington	State DC	Zip Code 20003		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses			002	407.93  Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	9 🗎	ement For:  Orimary Other (spe	2008 General		Travel Expenses
	State: District:		<i>37</i> , <b>▼</b>		
В.	Full Name (Last, First, Middle Initial) Capitol Hill Club				Transaction ID: SB17-EX5002 Date of Disbursement
	Mailing Address 300 First Street SE				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & A \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & V \end{smallmatrix} \end{bmatrix} \ Y$
	City Washington	State DC	Zip Code 20003		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses			002	516.50
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate ) President	ement For: C Primary Other (spe	2008 General		Travel Expenses
	State: District:				
C.	Full Name (Last, First, Middle Initial) Capitol Hill Club				Transaction ID: SB17-EX5023 Date of Disbursement
	Mailing Address 300 First Street SE				$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 0 \\ 3 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City Washington	State DC	Zip Code 20003		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses			002	179.15
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	• 🗎 -	ement For: C Primary Other (spe	2008 General		Travel Expenses
	State: District:		- 'J1 ▼		
s	UBTOTAL of Disbursements This Page (optional)			<b>&gt;</b>	1103.58

SCHEDULE B (FECForm 3)	Use seperate schedule(s)	FOR LINE NUMBER: PAGE 42 / 67
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one)    X   17   18   19a   19b   20a   20b   20c   21
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		rany person for the purpose of solicating contributions mmittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) Bill Shuster for Congress	· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial)  A. Hilton Harrisburg and Towers		Transaction ID: SB17-EX5047 Date of Disbursement
Mailing Address One North Second Stree	t	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Harrisburg	State Zip Code PA 17101	Amount of Each Disbursement this Period
Purpose of Disbursement Solitication and Fundraising Expenses Candidate Name	C	003 Category/ Type  100.49  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
· —	ement For: 2008 Primary General Other (specify)	Solitication and Fundraising Expenses
Full Name (Last, First, Middle Initial)  B. Hilton Harrisburg and Towers		Transaction ID: SB17-EX5048 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address One North Second Stree	t	0 9 0 7 2 0 0 7
City Harrisburg	State Zip Code PA 17101	Amount of Each Disbursement this Period
Purpose of Disbursement Solitication and Fundraising Expenses Candidate Name	C	003 Category/ Type  1133.65  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
* H	ement For: 2008 Primary General Other (specify)	Solitication and Fundraising Expenses
Full Name (Last, First, Middle Initial)  C. Hilton Harrisburg and Towers		Transaction ID: SB17-EX5057 Date of Disbursement
Mailing Address One North Second Stree	t	099 / 030 / 2007
City Harrisburg	State Zip Code PA 17101	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging Candidate Name	C	002 Category/ Type  193.32  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
9 🗎	ement For: 2008 Primary General Other (specify)	Lodging
SUBTOTAL of Disbursements This Page (optional)		1427.46
TOTAL This Period (last page this line number only)		

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FORLINE	NUMBER: PAGE 43 / 67				
	EMIZED DISBURSEMENTS	(check only						
•	LIVIIZED DISDOTISLIVIENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b				
				20a 20b 20c 21				
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
$\overline{}$	NAME OF COMMITTEE (In Full)							
$\rangle$	Bill Shuster for Congress							
۹.	Full Name (Last, First, Middle Initial) The Capital Grille			Transaction ID: SB17-EX4937 Date of Disbursement				
	Mailing Address 601 Pennsylvania Avenu	e NW		$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix} $				
	City Washington	State Zip Code DC 20004		Amount of Each Disbursement this Period				
	Purpose of Disbursement Travel Expenses		002	441.25  Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
		ement For: 2008 Primary General Other (specify)		Travel Expenses				
 3.	Full Name (Last, First, Middle Initial) The Capital Grille			Transaction ID: SB17-EX5014				
	The Capital Grille			Date of Disbursement				
	Mailing Address 601 Pennsylvania Avenu	e NW		08 / 24 / 2007				
	City Washington	State Zip Code DC 20004		Amount of Each Disbursement this Period				
	Purpose of Disbursement		000	275.00				
	Travel Expenses  Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
		ement For: 2008 Primary General Other (specify)		Travel Expenses				
Э.	Full Name (Last, First, Middle Initial) The Ben Franklin Society			Transaction ID: SB17-EX4963 Date of Disbursement				
	Mailing Address of Franklin County 293 South Gate Mall			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 8 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} Y$				
	City Chambersburg	State Zip Code PA 17201		Amount of Each Disbursement this Period				
	Purpose of Disbursement 12 month membership dues	001	300.00  Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	° 🗎 –	ement For: 2008 Primary General Other (specify)		12 month membership dues				
S	SUBTOTAL of Disbursements This Page (optional)							
T	OTAL This Period (last page this line number only)							

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	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 44 / 67 y one)
"	EMIZED DISBURSEMENTS	Detailed Summary Page	F	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) IS2 Technologies Inc.			Transaction ID: SB17-EX4923 Date of Disbursement
	Mailing Address 3018 Pleasant Valley Blv	⁄d		$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
		State Zip Code PA 16602		Amount of Each Disbursement this Period
	Purpose of Disbursement Computer serviced		001	50.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	°	ement For: 2008 Primary General Other (specify)	,,	Computer serviced
	State: District:	, (1 )/ <b>V</b>		
В.	Full Name (Last, First, Middle Initial) John Kurtz			<b>Transaction ID:</b> SB17-EX4986 Date of Disbursement
	Mailing Address 303 Laurel Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$
	•	State Zip Code PA 16617		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses		001	75.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate X President	ement For: 2008 Primary General Other (specify)		Travel Expenses
	State: District:			
C.	Full Name (Last, First, Middle Initial) Bull Feathers			Transaction ID: SB17-EX4933 Date of Disbursement
	Mailing Address 410 First Street SE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & T \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix} $
		State Zip Code DC 20003		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses		002	78.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	· →   -	ement For: 2008 Primary General Other (specify)		Travel Expenses
_	State: District:			
s	UBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	203.00

Altoona		by any person f	X 17 18 19a 19b 20a 20b 20c 21 for the purpose of solicating contributions
for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Bill Shuster for Congress  Full Name (Last, First, Middle Initial) O.K. Stuckey And Son  Mailing Address 1800 Eighth Avenue  City Altoona	and address of any political		Value of the state
Bill Shuster for Congress  Full Name (Last, First, Middle Initial) O.K. Stuckey And Son  Mailing Address 1800 Eighth Avenue  City Altoona	State Zin Code		
Full Name (Last, First, Middle Initial) O.K. Stuckey And Son  Mailing Address 1800 Eighth Avenue  City Altoona	Stata Zin Coda		
O.K. Stuckey And Son  Mailing Address 1800 Eighth Avenue  City Altoona	State Zin Code		
City S Altoona	State Zin Code		
Altoona	State Zin Code		09 14 7 2007
	PA 16602		Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies		001	484.95  Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	ment For: 2008 Primary General Other (specify)		Office Supplies
Full Name (Last, First, Middle Initial)			Transaction ID: SB17-EX4944
Verizon Wireless			Date of Disbursement
Mailing Address PO Box 25505			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 7 & M \end{smallmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 7 \end{smallmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code PA 18002		Amount of Each Disbursement this Period
Purpose of Disbursement Telephone Expenses		001	849.19  Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	ment For: 2008 Primary General Other (specify)		Telephone Expenses
Full Name (Last, First, Middle Initial) Verizon Wireless			Transaction ID: SB17-EX4976 Date of Disbursement
Mailing Address PO Box 25505			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix} $
	State Zip Code PA 18002		Amount of Each Disbursement this Period
Purpose of Disbursement Telephone Expenses		001	573.11
Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	ment For: 2008 Primary General Other (specify)		Telephone Expenses
SUBTOTAL of Disbursements This Page (optional) .			1907.25

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			Detailed Summary Page									19b			
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		d from such Reports a poses, other than using													
Ν	NAME OF COMM	ITTEE (In Full)													
$\rangle$	Bill Shuster for	Congress													
	Full Name (Last, F	irst, Middle Initial)						Trans	action	ı ID:	SB	17-F)	X502	24	
Α.	Verizon Wireles	SS							of Disk		_		1002	- •	
								0 <sup>M</sup> 9	M /	D	0	/ Y	Y	) 0 7 °	
	Mailing Address	PO Box 25505						0.9		3	0		2 (	007	
	City			State	Zip Code			Amou	nt of E	ach	Disl	ourser	nent	this Period	
	Lehigh Valley			PA	18002				-			-	-		i
	Purpose of Disburs	sement											. 5	501.98	
	Telephone Expens	ses				l oc	01.		efund o						_
	Candidate Name					Cate	egory/		ontribu				Und	er	
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	Office Sought:	House	Disburse	ment For:	2008	-		Toloni	hono	Evn	one	.00			
		Senate	X	Primary	General			Telepl	ione	⊏xµ	ens	65			
		President		Other (spe	ecify) 🔻										
	State:	District:													
	Full Name (Last, F	irst, Middle Initial)						Trans	action	ı ID:	SB	17-F)	X492	P1	
В.	ATLANTIC broa	adband							of Disk		_			- •	
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	Mailing Address	Box 371801						07		1	6		2 (	007	
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	City Pittsburgh			State PA	Zip Code 15250			Amou	nt of E	ach	Disi	ourser	nent	this Period	
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	Purpose of Disburs Internet service	sement				00	01					-1 - 6 5	-		4
	Candidate Name						egory/		efund ontribu						
	Candidate Name					Ty			C.F.F				0	<b>.</b>	
	Office Sought:	House	Dieburea	ment For:	2008	' ' '	pc								
	Office Gought.	Senate		Primary	General			Intern	et sei	rvice	€				
		President		Other (spe											
	State:	District:		Other (ope	ony) $lacksquare$										
_	Full Name (Last, F											47.5			_
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	Mailing Address	Box 371801						0 7	,	້1	9	Ĺ	2 (	) 0 7 °	
	City			State	Zip Code			Amou	nt of E	ach	Disl	ourser	nent i	this Period	
	Pittsburgh			PA	15250	·								54.02	٦
	Purpose of Disburs Internet service	sement					0.4				_				J
	Candidate Name						01		efund ontribu						
	Candidate Name						egory/ /pe		C.F.F				Ond	O1	
	Office Sought	Наиза	Dichura	mont Ear	2008	L ' y	,he								
	Office Sought:	House		ment For: Primary	General			Intern	et sei	rvice	9				
		Senate President	^	•											
	State:	District:		Other (spe	oliy) ♥										
_	Glaic.	District.													_
l _	UDTOTAL 17		,										6	60.26	7
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S	CHEDULE B (FEC Form 3)	Use seperate	schedule(s)	FOR LINE	
IT	EMIZED DISBURSEMENTS	for each cate Detailed Sum	gory of the (	(check only	X 17
	y Information copied from such Reports and State for commercial purposes, other than using the nar				
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress				
Α.	Full Name (Last, First, Middle Initial) ATLANTIC broadband				Transaction ID: SB17-EX4973 Date of Disbursement
	Mailing Address Box 371801				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O \end{smallmatrix} T \end{bmatrix} $
	City Pittsburgh		p Code 5250		Amount of Each Disbursement this Period
	Purpose of Disbursement Internet service Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
		sement For:  X Primary  Other (specify)	2008 General		Internet service
В.	Full Name (Last, First, Middle Initial) ATLANTIC broadband				Transaction ID: SB17-EX4954 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address Box 371801	Otata 7:	- 0-4-		
	City Pittsburgh		p Code 5250		Amount of Each Disbursement this Period
	Purpose of Disbursement Internet service Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	°	sement For:  K Primary  Other (specify)	2008 General		Internet service
C.	Full Name (Last, First, Middle Initial) ATLANTIC broadband				Transaction ID: SB17-EX4996 Date of Disbursement
	Mailing Address Box 371801				$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix} $
	City Pittsburgh		p Code 5250		Amount of Each Disbursement this Period
	Purpose of Disbursement Internet service			001	56.72  Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	°	sement For:  X Primary  Other (specify)	2008 General		Internet service
s	UBTOTAL of Disbursements This Page (optional	)			215.00
	OTAL This Period (last page this line number onl				

SC	CHEDULE B (FEC Form 3)	FOR LINE					
IT	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	7 one)			
		Detailed Summary Page		20a 20b 20c 21			
	/ Information copied from such Reports and Sta or commercial purposes, other than using the n						
$\setminus$	NAME OF COMMITTEE (In Full)						
$\geq$	Bill Shuster for Congress						
A.	Full Name (Last, First, Middle Initial) ATLANTIC broadband			<b>Transaction ID:</b> SB17-EX4995  Date of Disbursement			
	Mailing Address Box 371801			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 4 & 4 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 & Y \end{bmatrix}$			
	City Pittsburgh	State Zip Code PA 15250		Amount of Each Disbursement this Period			
	Purpose of Disbursement Internet service		001	109.48  Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	x Primary General Other (specify)		Internet service			
	State: District:						
В.	Full Name (Last, First, Middle Initial) CenPenn Realty LLC			Transaction ID: SB17-EX4947 Date of Disbursement			
	Mailing Address 513 Allegheny Street		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Hollidaysburg	State Zip Code PA 16648		Amount of Each Disbursement this Period			
	Purpose of Disbursement August 2007 rent		001	500.00  Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	x Primary General Other (specify)		August 2007 rent			
	State: District:						
C.	Full Name (Last, First, Middle Initial) CenPenn Realty LLC			Transaction ID: SB17-EX4981 Date of Disbursement			
	Mailing Address 513 Allegheny Street			$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & \check{Y} & \check{Y} & \check{Y} \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$			
	City Hollidaysburg	State Zip Code PA 16648		Amount of Each Disbursement this Period			
	Purpose of Disbursement September 2007 rent		001 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disbu Senate President State: District:	x Primary General Other (specify)		September 2007 rent			
SI	JBTOTAL of Disbursements This Page (option	al)		1109.48			
	OTAL This Period (last page this line number of	,					

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	CHEDULE B (FEC Form 3 EMIZED DISBURSEMEN	rs os	se seperate scheduler reach category of the etailed Summary Pago	(check on	PAGE 49 / 67
	y Information copied from such Reports a or commercial purposes, other than usin				for the purpose of solicating contributions
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress	-			
Α.	Full Name (Last, First, Middle Initial) The Blairmont Club				Transaction ID: SB17-EX5043 Date of Disbursement  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 145 Larch Stree	t State	z Zip Code		Amount of Each Disbursement this Period
	Hollidaysburg Purpose of Disbursement Travel Expenses Candidate Name	PA	16648	002 Category/	72.59  Refund or Disposal of Excess Contributions Required Under
	Office Sought:  House Senate President State:  District:	Disbursement X Prim Othe		Type	11 C.F.R. 400.53 Travel Expenses
В.	Full Name (Last, First, Middle Initial) Jim Frank				Transaction ID: SB17-EX4961 Date of Disbursement
	Mailing Address 1628 St. Francis	Lane			$ \begin{array}{c c}  & M & M \\ \hline 0 & 8 & M \end{array} $ $ \begin{array}{c c}  & D & D & M \\ \hline 0 & 9 & M & M \end{array} $ $ \begin{array}{c c}  & Y & Y & Y & Y & Y & Y & Y & Y & Y & $
	City Altoona	State PA	Zip Code 16602		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disbursement X Prim Othe			Travel Expenses
	State: District: Full Name (Last, First, Middle Initial)				T ID OD47 EV4040
C.	S&T Bank				Transaction ID: SB17-EX4912 Date of Disbursement
	Mailing Address 1100 Logan Blv	d			$\begin{bmatrix} 0 & 7 & M & M & M & M & M & M & M & M & M$
	City Altoona	State PA	Zip Code 16602		Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disbursement  X Prim Other		ıl	Bank Service Charge
_	State: District:				

SUBTOTAL of Disbursements This Page (optional) .....

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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose	
or for commercial purposes, other than using the name and address of any political committee to solicit contribution	
or to commercial purposes, other than using the name and address or any political committee to solicit contribution	
NAME OF COMMITTEE (In Full)	
Bill Shuster for Congress	
Full Name (Last, First, Middle Initial)  A. S&T Bank  Transaction Date of Disk	n ID: SB17-EX4967 bursement
Mailing Address 1100 Logan Blvd	0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Amount of E PA 16602	Each Disbursement this Period
Purpose of Disbursement Bank Service Charge 001 Refund	25.00 or Disposal of Excess
	utions Required Under R. 400.53
Office Sought:  House Senate President  Disbursement For: 2008 X Primary General Other (specify)	ice Charge
State: District:	
Full Name (Last, First, Middle Initial) <b>B.</b> S&T Bank  Transaction Date of Disk	n ID: SB17-EX4987 bursement
Mailing Address 1100 Logan Blvd	$\begin{bmatrix} \begin{smallmatrix} D & O & D \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & Y \\ Z & O & Q & T \end{smallmatrix} \end{bmatrix}$
City State Zip Code Amount of E	Each Disbursement this Period
Altoona PA 16602	
Purpose of Disbursement	25.00
Candidate Name Category/ Contribu	or Disposal of Excess utions Required Under R. 400.53
Туре	1. 400.53
Office Sought: House Disbursement For: 2008 Senate X Primary General President Other (specify) ▼	ice Charge
State: District:	
Full Name (Last, First, Middle Initial)  C. Cingular Wireless  Transaction Date of Disk	n ID: SB17-EX4918
Mailing Address PO Box 6463	<sup>D</sup> 1 6
City State Zip Code Amount of E Carol Stream IL 60197	Each Disbursement this Period
Purpose of Disbursement Telephone Expenses  001 Refund	256.56 or Disposal of Excess
Candidate Name Category/ Contribu	of Disposal of Excess utions Required Under R. 400.53
Office Sought:  House Senate President  State:  Disbursement For: 2008  X Primary General Other (specify) ▼  Telephone	Expenses
SUBTOTAL of Disbursements This Page (optional)	306.56

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S	CHEDULE B (FEC Form	3)	Use sepe	erate schedule(s)	-	NE NUMBER: PAGE 51 / 67
IT	EMIZED DISBURSEMEN	ITS	for each	category of the (	(check	only one)
			Detailed:	Summary Page		X   17
						on for the purpose of solicating contributions solicit contributions from such committee
$\setminus$	NAME OF COMMITTEE (In Full)					
$ \rangle$	Bill Shuster for Congress					
$\mathbb{L}$						
A.	Full Name (Last, First, Middle Initial) Nemacolin Woodlands Resort &	Spa				<b>Transaction ID:</b> SB17-EX4939  Date of Disbursement
	Mailing Address 1001 LaFayett	e Drive				07  16  2007
	City Farmington		State PA	Zip Code 15437		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses				002	338.14
	Candidate Name				Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		ment For: Primary Other (spe	2008 General	Nr	Travel Expenses
	State: District:		Outlot (ope	(Sily) <b>\</b>		
	Full Name (Last, First, Middle Initial)					Transaction ID: SB17-EX5003
В.	Nemacolin Woodlands Resort &	Spa				Date of Disbursement
	Mailing Address 1001 LaFayett	e Drive				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Farmington		PA	15437		89.75
	Purpose of Disbursement Lodging & Catering for Fundraiser				001	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate		ment For: Primary	2008 General		Lodging & Catering for Fu- ndraiser
	State: President District:		Other (spe	ecity)		
	Full Name (Last, First, Middle Initial)					
C.	Nemacolin Woodlands Resort &	Spa				Transaction ID: SB17-EX5020 Date of Disbursement
	Mailing Address 1001 LaFayett	e Drive				08
	City Farmington		State PA	Zip Code 15437		Amount of Each Disbursement this Period
	Purpose of Disbursement					3649.25
	Solitication and Fundraising Expenses Candidate Name	i			003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:	2008		Colitiontion and Francis
	Senate	X	Primary	General		Solitication and Fundrais- ing Expenses
	President		Other (spe	cify)		
_	State: District:					
91	IIRTOTAL of Dishursements This Pag	e (ontional)				4077.14

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S	CHEDULE B (FEC Form	13)	Use sepe	erate schedule(s)		INE NUMBER: PAGE 52 / 67
IT	EMIZED DISBURSEME	NTS		category of the Summary Page	(cneck	x only one)    X   17
						son for the purpose of solicating contributions o solicit contributions from such committee
$\setminus$	NAME OF COMMITTEE (In Full)					
$ \rangle$	Bill Shuster for Congress					
_	Full Name (Last, First, Middle Initial)					Transaction ID: SB17-EX5059
A.	Nemacolin Woodlands Resort	& Spa				Date of Disbursement
	Mailing Address 1001 LaFaye	tte Drive				0 9 M / D 3 D / Y 2 0 0 7 Y
	City		State	Zip Code		Amount of Each Disbursement this Period
	Farmington		PA	15437		400000
	Purpose of Disbursement				003	4000.00  Refund or Disposal of Excess
	Candidate Name				Category/ Type	
	Office Sought: House	Disburse	ment For:	2008		Form duration in
	Senate	X	Primary	General		Fundraising
	President		Other (spe	ecify)		
	State: District:					
В.	Full Name (Last, First, Middle Initial) e2c consulting Inc.					Transaction ID: SB17-EX4946 Date of Disbursement
	Mailing Address PO Box 2957	6				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Washington		State DC	Zip Code 20017		Amount of Each Disbursement this Period
	Purpose of Disbursement Solitication and Fundraising Expense			20017	000	4000.00
	Candidate Name	<i>:</i> 5			003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		ment For: Primary Other (spe	2008 General		Solitication and Fundrais- ing Expenses
	State: District:		` '	, <b>,</b>		
С.	Full Name (Last, First, Middle Initial) e2c consulting Inc.	<b>-</b>				Transaction ID: SB17-EX4982 Date of Disbursement
	Mailing Address PO Box 2957	6				$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix} $
	011		O	7: 0 !		
	City Washington		State DC	Zip Code 20017		Amount of Each Disbursement this Period
	Purpose of Disbursement					4000.00
	Solitication and Fundraising Expense	es			003	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate		ment For: Primary	2008 General		Solitication and Fundrais- ing Expenses
	President State: District:		Other (spe			mg Exponded
	2.00.00					
s	UBTOTAL of Disbursements This Pa	ge (optional) .	<u></u>			12000.00

	CHEDULE B (FEC Form EMIZED DISBURSEMEN	-	for each	erate schedule(s) category of the	FOR LIN (check or	
			Detailed	Summary Page		X   17   18   19a   19b   20a   20b   20c   21
						n for the purpose of solicating contributions solicit contributions from such committee
$\setminus$	NAME OF COMMITTEE (In Full)					
/	Bill Shuster for Congress					
Α.	Full Name (Last, First, Middle Initial) Nicole Fedeli-Turiano	Transaction ID: SB17-EX4948 Date of Disbursement				
	Mailing Address 4 Devon Drive	- 07				
	City		Amount of Each Disbursement this Period			
	Hollidaysburg		PA	16648		150.00
	Purpose of Disbursement Salary				001	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		ment For: Primary Other (spe	2008 General		Salary
_	State: District:  Full Name (Last, First, Middle Initial)					
В.						Transaction ID: SB17-EX4964 Date of Disbursement
	Mailing Address 4 Devon Drive	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Hollidaysburg		State PA	Zip Code 16648		Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies				001	4.60  Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate		ment For: Primary	2008 General		Office Supplies
	President State: District:		Other (spe	ecify) 🔻		
	Full Name (Last, First, Middle Initial)					Transaction ID: CD17 EV4004
C.	Nicole Fedeli-Turiano					Transaction ID: SB17-EX4984  Date of Disbursement
	Mailing Address 4 Devon Drive					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Hollidaysburg		State PA	Zip Code 16648		Amount of Each Disbursement this Period
	Purpose of Disbursement				i i	150.00
	Salary Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Senate		ment For:	2008 General	76-	Salary
	State: President District:		Other (spe	ecny) 🔻		
s	SUBTOTAL of Disbursements This Pag	e (optional) .			<b>&gt;</b>	304.60

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S	CHEDULE B (FEC F	orm 3)	Use sepe	rate schedule(s)	FOR LINE (check onl	NUMBER:	PAGE 54 / 67
IT	EMIZED DISBURSE	MENTS		category of the Summary Page	_   `	<u> </u>	19a
			Detailed	Summary Fage			20c 21
	y Information copied from such for commercial purposes, other						
$\setminus$	NAME OF COMMITTEE (In F	ull)					
17	Bill Shuster for Congress						
<u></u>	Full Name (Last, First, Middle	Initial)				<b></b>	
A.	Nicole Fedeli-Turiano	muaij				Transaction ID: SB Date of Disbursemen	nt
	Mailing Address 4 Devon	Drive				0 9 5 7 3 0	<sup>Y</sup> 2007 <sup>Y</sup>
	City Hollidaysburg		State PA	Zip Code 16648		Amount of Each Disk	oursement this Period
	Purpose of Disbursement Salary				001	Refund or Dispos	150.00
	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53	quired Under
	Office Sought: House Senate	X	ement For: Primary Other (spe	2008 General		Salary	
	State: District:		Other (spe	City) \			
	Full Name (Last, First, Middle	Initial)				Transaction ID: SB	17-FX4943
B.	AT&T Mobility					Date of Disbursemen	nt
	Mailing Address PO Box	6463				$\begin{bmatrix} 0 & 7 & M \\ 0 & 7 & M \end{bmatrix}$	<sup>Y</sup> 2007 <sup>Y</sup>
	City Carol Stream		State IL	Zip Code 60197		Amount of Each Disk	oursement this Period
	Purpose of Disbursement		IL.	60197			218.86
	Telephone Expenses				001	Refund or Dispos	al of Excess
	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53	
	Office Sought: House Senate Preside	Х	ement For: Primary Other (spe	2008 General		Telephone Expens	es
	State: District:		Other (spe	City) 🔻			
	Full Name (Last, First, Middle	Initial)				Transaction ID: SB	 17-FX4975
C.	AT&T Mobility					Date of Disbursemen	
	Mailing Address PO Box	6463				08 / 24	<sup>'</sup> 2007
	City Carol Stream		State IL	Zip Code 60197		Amount of Each Disk	oursement this Period
	Purpose of Disbursement				• •		133.49
	Telephone Expenses				001	Refund or Dispos	
	Candidate Name				Category/ Type	Contributions Rec	
	Office Sought: House Senate		ement For: Primary	2008 General		Telephone Expens	es
	Preside		Other (spe				
_	State: District:						
s	UBTOTAL of Disbursements T	his Page (optional)			<b>&gt;</b>		502.35

Any or fo	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		
or fo				X 17 18 19a 19b 20a 20b 20c 21
· \	Information copied from such Reports and Statemer commercial purposes, other than using the name			
/ ˈ	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
	Full Name (Last, First, Middle Initial) Bedford Springs Resort			Transaction ID: SB17-EX5005 Date of Disbursement
_ N	Mailing Address ATTN: Accounts Receival PO Box 639		$\begin{bmatrix}\begin{smallmatrix}M&8&M\\0&8&\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&2&0\\2&4\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&0&0&7\\2&0&0&7\end{smallmatrix}$	
	City Bedford		Amount of Each Disbursement this Period	
]	Purpose of Disbursement Travel Expenses Candidate Name	002 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
		ment For: 2008 Primary General Other (specify)	Туре	Travel Expenses
_	Full Name (Last, First, Middle Initial) Bedford Springs Resort			Transaction ID: SB17-EX5006  Date of Disbursement
<u></u>	Mailing Address ATTN: Accounts Receival PO Box 639		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & 2 & 0 & 0 \end{smallmatrix} 7 \end{bmatrix}$	
	,	State Zip Code PA 15522		Amount of Each Disbursement this Period
]	Purpose of Disbursement Travel Expenses Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
		ment For: 2008 Primary General Other (specify)		Travel Expenses
_	Full Name (Last, First, Middle Initial) Bedford Springs Resort		Transaction ID: SB17-EX5007 Date of Disbursement	
N	Mailing Address ATTN: Accounts Receival PO Box 639		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Y \\ D & Q & Q & Y \end{smallmatrix} $	
		State Zip Code PA 15522		Amount of Each Disbursement this Period
]	Purpose of Disbursement Travel Expenses Candidate Name		002 Category/	68.00  Refund or Disposal of Excess Contributions Required Under
_			Type	11 C.F.R. 400.53
	9 🗎	ment For: 2008 Primary General Other (specify)		Travel Expenses
	BTOTAL of Disbursements This Page (optional)			479.61

	CHEDULE B (FEC Form 3)		te schedule(s)	FOR LINE (check only	
IT	EMIZED DISBURSEMENTS		tegory of the Immary Page	1 `	X 17
		Betanea ea	ininary rage		20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name				
Λ	NAME OF COMMITTEE (In Full)				
/	Bill Shuster for Congress				
<u>/</u>	Full Name (Last, First, Middle Initial)				Transaction ID: SB17-EX5010
A.	Givanni's				Date of Disbursement
	Mailing Address 109 E. College Street				08 24 2007
	City Iowa City		Zip Code 52240		Amount of Each Disbursement this Period
	Purpose of Disbursement	<u> </u>	32240		290.00
	Travel Expenses			002	Refund or Disposal of Excess
	Candidate Name		'	Category/	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:	2008	Туре	
		Primary	General		Travel Expenses
	President	Other (specif	y) <b>▼</b>		
	State: District:				
В.	Full Name (Last, First, Middle Initial) Fiore Chrysler Jeep				Transaction ID: SB17-EX5045 Date of Disbursement
					09 30 2007
	Mailing Address Rte 36 Logan Blvd				09 30 2007
	,		Zip Code		Amount of Each Disbursement this Period
	Altoona	PA	16602		286.87
	Purpose of Disbursement Vehicle Expenses			001	Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:	2008	Туре	11 6.1 .11. 400.00
		Primary	General		Vehicle Expenses
	President	Other (specif	y) <b>▼</b>		
_	State: District: Full Name (Last, First, Middle Initial)				
C.	Hook				Transaction ID: SB17-EX5058 Date of Disbursement
	Mallan Address				09 / 30 / 2007
	Mailing Address 3241 M Street NW				03 00 2007
	•		Zip Code 20007		Amount of Each Disbursement this Period
	Washington Purpose of Disbursement	100	20007		206.60
	Travel Expenses			002	Refund or Disposal of Excess
	Candidate Name		] '	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:	2008	1 300	Turnel Francisco
	Senate	Primary	General		Travel Expenses
	President State: District:	Other (specif	fy) 🔻		
Г	otate. District.				
s	UBTOTAL of Disbursements This Page (optional)				783.47

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State:

# SCHEDULE B (FEC Form 3 )

District:

FOR LINE NUMBER: PAGE 57 / 67 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 17 18 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) Transaction ID: SB17-CN5718 Christopher K Gleason Date of Disbursement 0 8 2007 Mailing Address PO Box 8 City State Zip Code Amount of Each Disbursement this Period Johnstown PA 15907 967.42 Purpose of Disbursement IN-KIND RECEIVED Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: Disbursement For: House In-Kind Received Catering X General Senate Primary for luncheon President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	967.42
TOTAL This Period (last page this line number only)	<b>—</b>	36418.71

	CHEDULE B (FECFORIII 3 )	Use seperate schedule(s)	FOR LINE	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and Stat for commercial purposes, other than using the na			
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
A.	Full Name (Last, First, Middle Initial) William Shuster  Mailing Address 9 Overlook Drive			Transaction ID: SB21-EX4972 Date of Disbursement  O 8 M / D 2 D / Y Y Y O Y O T
	City Hollidaysburg	State Zip Code PA 16648		Amount of Each Disbursement this Period
	Purpose of Disbursement Donations Candidate Name	C	012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  Senate President State:  Disbut	rsement For: 2008  X Primary General Other (specify)	71	Donations
В.	Full Name (Last, First, Middle Initial) Juniata Co Republican Comm.			Transaction ID: SB21-EX4968 Date of Disbursement
	Mailing Address RR #1 Box 30-A		$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{smallmatrix} \Big/ \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 2 & 4 \end{smallmatrix} \Big/ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \Big]$	
	City Thompsontown Purpose of Disbursement Donations	State Zip Code PA 17094	012	Amount of Each Disbursement this Period  500.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbu Senate President State: District:	rsement For: 2008  X Primary General  Other (specify) ▼		Donations
C.	Full Name (Last, First, Middle Initial) Bedford Co. Republican Comm		Transaction ID: SB21-EX4993 Date of Disbursement	
	Mailing Address C/O Christy Topper 242 E Simpson Street		$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 4 \\ 0 & 1 & 4 \end{bmatrix}$ $\begin{bmatrix} 1 & 2 & 1 & 4 \\ 0 & 2 & 1 & 1 & 4 \end{bmatrix}$	
	City Bedford	State Zip Code PA 15522		Amount of Each Disbursement this Period
	Purpose of Disbursement Donations 012			32.50  Refund or Disposal of Excess
	Candidate Name	C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbu Senate President State: District:	xsement For: 2008 X Primary General Other (specify)		Donations
_	UBTOTAL of Disbursements This Page (optiona			571.97

SCHEDULE B (FECFOIII 3 )	Use seperate schedule(s)	FOR LINE (check only			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		17 18 19a 19b 20a 20b 20c X 21		
Any Information copied from such Reports and State or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full) Bill Shuster for Congress	•				
Full Name (Last, First, Middle Initial)  A. Mifflin Co Republican Committee  Mailing Address 448 West Fourth Street			Transaction ID: SB21-EX4945 Date of Disbursement  M 7 M / D 2 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Lewistown	State Zip Code PA 17044		Amount of Each Disbursement this Period		
Purpose of Disbursement Donations Candidate Name	C	012 category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	sement For: 2008  X Primary General  Other (specify)		Donations		
Full Name (Last, First, Middle Initial)  B. Stern For Assembly			Transaction ID: SB21-EX4969		
Stern For Assembly  Mailing Address PO Box 312			Date of Disbursement  M 8 M / D 2 A / Y Y Y O Y 7 Y Y Y O Y 7 Y		
City Hollidaysburg Purpose of Disbursement Political Contributions	State Zip Code PA 16648	011	Amount of Each Disbursement this Period  300.00  Refund or Disposal of Excess		
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	sement For: 2008  X Primary General  Other (specify)		Political Contributions		
Full Name (Last, First, Middle Initial)  C. National MS Society			Transaction ID: SB21-EX4994 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address Keystone Branch 506 Third Avenue					
City Duncansville	State Zip Code PA 16635		Amount of Each Disbursement this Period 240.00		
Purpose of Disbursement Donations					
Candidate Name	C	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53		
	sement For: 2008  X Primary General  Other (specify) ▼		Donations		
SUBTOTAL of Disbursements This Page (optional	)	▶	590.00		
TOTAL This Period (last page this line number only					

	CHEDULE B (FEC FOIIII 3 )	Use seperate schedule(s)	FOR LINE	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and Sta or commercial purposes, other than using the n			
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) Brent Gates  Mailing Address 310 Penn Street			Transaction ID: SB21-EX4962 Date of Disbursement  M8 M / D0 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Suite 200 City Hollidaysburg	State Zip Code PA 16648		Amount of Each Disbursement this Period
	Purpose of Disbursement Donations Candidate Name	<b>_</b>	012 ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbu Senate President State: District:	x Primary General Other (specify) ▼		Donations
В.	Full Name (Last, First, Middle Initial) Swiss Club of Altoona			Transaction ID: SB21-EX4992 Date of Disbursement
	Mailing Address 1224 Tyler Avenue		$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$	
	City Altoona Purpose of Disbursement	State Zip Code PA 16602		Amount of Each Disbursement this Period
	Donations Candidate Name	<b>_</b>	012 ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  Senate  President  State:  Disbut	rsement For: 2008  X Primary General  Other (specify) ▼		Donations
C.	Full Name (Last, First, Middle Initial) Ronald S. Nocco			Transaction ID: SB21-EX4957 Date of Disbursement
	Mailing Address 1416 Philadelphia Stre		$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} & M \\ \begin{smallmatrix} M \\ O \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} & \begin{bmatrix} M \\ O \end{smallmatrix} &$	
	City Indiana	State Zip Code PA 15701		Amount of Each Disbursement this Period
	Purpose of Disbursement Donations	012	55.00  Refund or Disposal of Excess	
	Candidate Name		ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  Senate  President  State:  Disbut	x Primary General Other (specify) ▼		Donations
	UBTOTAL of Disbursements This Page (option		I.	205.00

50	CHEDULE B (FEC Form 3)	Use seperate schedule(s		NUMBER: PAGE 61 / 67
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on	17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and State or commercial purposes, other than using the na			
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) Graves For Congress			Transaction ID: SB21-EX4952 Date of Disbursement
	Mailing Address 2345 Grand Blvd Suite 250			077 7 31 7 2007
	City Kansas City	State Zip Code MO 64108		Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Political Contributions Candidate Name Samuel Graves		011 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	-	sement For: 2008  X Primary General Other (specify)	1,750	Political Contributions
В.	Full Name (Last, First, Middle Initial) Meling 4 Commissioner			Transaction ID: SB21-EX4970 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address PO Box 96  City	State Zip Code		Amount of Each Disbursement this Period
	Hollidaysburg PA 16648  Purpose of Disbursement Political Contributions 011			Refund or Disposal of Excess Contributions Required Under
	Candidate Name		Category/ Type	11 C.F.R. 400.53
		sement For: 2008  X Primary General  Other (specify) ▼		Political Contributions
	Full Name (Last, First, Middle Initial) Tomassetti For Commissioner			Transaction ID: SB21-EX4971 Date of Disbursement
	Mailing Address 2006 Sixth Avenue			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contributions Candidate Name  011 Category/			250.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	°	sement For: 2008  X Primary General  Other (specify) ▼	Туре	Political Contributions
	ı			

	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check on	NUMBER: PAGE 62 / 67 ly one) 17 18 19a 19b
Δn	y Information copied from such Reports and Statem	, ,	d by any porcon	20a 20b 20c X 21
	for commercial purposes, other than using the name			
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) Jobel Court #11 L.O.S.N.A.			Transaction ID: SB21-EX4978 Date of Disbursement
	Mailing Address PO Box 688			$ \begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix} / \begin{bmatrix} D & 2 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & 0 & 7 & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $
		State Zip Code PA 16648		Amount of Each Disbursement this Period
	Purpose of Disbursement Donations Candidate Name		012	25.00  Refund or Disposal of Excess Contributions Required Under
		ement For: 2008	Category/ Type	11 C.F.R. 400.53
	Senate X President	Primary General Other (specify) ▼		Donations
_	State: District: Full Name (Last, First, Middle Initial)			
В.	Women's Club Of Altoona			Transaction ID: SB21-EX4979 Date of Disbursement
	Mailing Address 527 East Walton Avenue			$ \begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} \begin{bmatrix} 0 & 2 & 4 \\ 0 & 2 & 4 \end{bmatrix} \begin{bmatrix} 0 & 2 & 4 \\ 0 & 2 & 0 & 0 \\ 0 & 2 & 4 \end{bmatrix} \begin{bmatrix} 0 & 2 & 4 \\ 0 & 2 & 0 & 0 \\ 0 & 2 & 4 \end{bmatrix} $
	,	State Zip Code PA 16602		Amount of Each Disbursement this Period
	Purpose of Disbursement Donations Candidate Name			Refund or Disposal of Excess Contributions Required Under
		ement For: 2008	Туре	11 C.F.R. 400.53  Donations
	Senate X President State: District:	Primary General Other (specify) ▼		Bondhono
<b>C</b> .	Full Name (Last, First, Middle Initial) Indiana County Humane Society			Transaction ID: SB21-EX4980 Date of Disbursement
	Mailing Address 65 Haven Drive			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
		State Zip Code PA 15701		Amount of Each Disbursement this Period
	Purpose of Disbursement Donations 012			Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate X President	ement For: 2008 Primary General Other (specify)		Donations
	State: District:			150.00
	UBTOTAL of Disbursements This Page (optional) .			150.00
l T	OTAL This Period (last page this line number only)			

SCHEDULE B (FECForm 3)	Use seperate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	7 one)  17
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) Bill Shuster for Congress	,,		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21-EX4990
A. Team Franklin County			Date of Disbursement
Mailing Address 169 Theodore Drive			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 4 & 4 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 & Y \\ \end{smallmatrix}$
City Chambersburg	State Zip Code PA 17201		Amount of Each Disbursement this Period
Purpose of Disbursement	17201		25.00
Donations		012	Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
- I	sement For: 2008  X Primary General  Other (specify)		Donations
State: District:			
Full Name (Last, First, Middle Initial)  B. Tom Roomey For Congress			
I om Rooney For Congress	Tom Rooney For Congress		
Mailing Address 2336 S. East Ocean Bl	Mailing Address 2336 S. East Ocean Blvd #313		
City Stuart	State Zip Code FL 34996		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contributions  011			1000.00  Refund or Disposal of Excess
Candidate Name Thomas Joseph Rooney	L.	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
X X	sement For: 2008  X Primary General  Other (specify)		Political Contributions
Full Name (Last, First, Middle Initial)  C. Dreams Go On Trail Ride			Transaction ID: SB21-EX5027 Date of Disbursement
Mailing Address RR 2 Box 351			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix} $
City Hollidaysburg	State Zip Code PA 16648		Amount of Each Disbursement this Period
Purpose of Disbursement Donations 012			100.00  Refund or Disposal of Excess
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
9 🗎	sement For: 2008  X Primary General Other (specify)		Donations
SUBTOTAL of Disbursements This Page (optional	)		1125.00
TOTAL This Period (last page this line number onl			

## Image# 27991000532

State:

# SCHEDULE B (FEC Form 3 )

District:

FOR LINE NUMBER: PAGE 64 / 67 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 18 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) Transaction ID: SB21-EX5074 Saylor Retention 07 Date of Disbursement 0 9 3 Ŏ 2007 Mailing Address 742 South 80th Street City State Zip Code Amount of Each Disbursement this Period Harrisburg PA 17111 260.00 Purpose of Disbursement Blairmont Club catering charges 011 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2008 House Blairmont Club catering charges Senate X Primary General President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	260.00
TOTAL This Period (last page this line number only)	•	5401.97

### PAGE 65 / 67 SCHEDULE C (FEC Form 3 ) Use separate schedule(s) FOR LINE NUMBER: for each category of the **LOANS** (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) Bill Shuster for Congress Transaction ID: SC10-LN20 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: X Primary S&T Bank General Mailing Address Other (specify) Commercial Lending 208 West Plank Road City Altoona State PA ZIP Code 16602 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 30000.00 30000.00 .00 **TERMS** Date Due Interest Rate Secured: Date Incurred 1 9 8.2500 % (apr) 0 1 2007 20080530 Yes X No List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 30000.00 SUBTOTALS This Period This Page (optional) ...... 30000.00 TOTALS This Period (last page in this line only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE D (FEC Form 3 )

(Use separate

PAGE 66 / 67

Excluding Loans  for num			nedule(s) or each bered line)	FOR LINE NUMBER: (check only one) 9 X 10				
	ME OF COMMITTEE (In Full) Shuster for Congress							
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Covington & Burling LLP  Mailing Address 1201 Pennsylvania Avenue NW			Nature of Debt (Purpose): Invoice: Invoice 60339388 Administrative				
ľ								
	City State Washington DC	ZIP Code 20004						
	Outstanding Balance Beginning This Period				Transaction ID: SD10-INV3289			
	7500.00							
	Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period			
	.00	.00	)		7500.00			
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Mobility			Nature of Debt (Purpose): Invoice: 830233055 Admini- strative/Salary				
ľ	Mailing Address PO Box 6463							
- 1	City State Carol Stream IL	ZIP Code 60197						
	Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10-INV4891			
	.00							
	Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period			
	126.66	.00	)		126.66			
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Invoice: 814 696-0225 608 26Y Administra				
ı	Mailing Address PO Box 660748							
	City State Dallas TX	ZIP Code 75266						
	Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10-INV4918			
	.00							
	Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period			
	167.57	.00	)		167.57			
1) 5	SUBTOTALS This Period This Page (optional)		. •	<b>-</b>	7794.23			
2) 7	FOTALS This Period (last page this line number on	ly)		>	7794.23			
3)	TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	. )	<b>-</b>				
4)	ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page only)	, ,	<b>.</b>				

# Image# 27991000535

Form/Schedule: **F3A**Transaction ID:

The accompanying Report of Receipts and Disbursements from July 1 2007 through September 30 2007 for the Bill Shuster for Congress Committee included in the prescribed form have been prepared by Frederick A. Ciocca CPA. I have prepared such financial statements in my capacity a treasurer of the Bill Shuster for Congress Committee. This amendment is in response to our RQ-2 dated November 15 2007 concerning our descriptions for the purpose.